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Supervisors' cultural backgrounds can influence supervision content, process, and outcomes (Bernard & Goodyear, 2004; Brown & Brown-Landrum, 1995). Although the empirical literature on multicultural supervision has greatly increased in recent years (Borders, 2005), no study has focused primarily on international supervisors. Since clinical supervisors take a vital role in enhancing the development of supervisees, it is important to understand the relationship between international supervisors' cultural factors (e.g., acculturation), their perceptions of supervisor credibility (e.g., social influence), and supervisor self-efficacy in cross-cultural dyads of clinical supervision.

This study used social influence theory (Strong, 1968) as a framework to conceptualize supervisor credibility. Thirty-seven international supervisors who worked or were currently working with U.S. - born supervisees were surveyed to investigate factors (i.e., supervision self-efficacy, acculturation) that might impact international supervisors' social influence variables. The Supervisor Rating Form-Short (SRF-S), the Counselor Supervisor Self-Efficacy Scale (CSSES), and the American International Relations Survey (AIRS) were used. The sample represented 5 continents (i.e., Asia, Africa, Europe, Latin America, and North America), with 65% ($n = 24$) of the sample from Asia.

Pearson Product-Moment Coefficients revealed significant relationships between supervisor self-efficacy and social influence variables (i.e., expertness, attractiveness, trustworthiness), and between attractiveness and perceived prejudice (i.e., one aspect of

acculturation). Supervisor self-efficacy did not mediate the relationship between acculturation and social influence variables. Multiple regression analyses revealed that gender, first language preference, and perceived racial appearance did not serve as predictors of perceived social influence variables.

Results suggest that supervisor self-efficacy might have a significant and broader impact on international supervisors' self-perceptions of their social influence, compared with their acculturation levels. As the first empirical study of international supervisors' social influence, this study provides implications for researchers, counselor educators, and clinical supervisors.

INTERNATIONAL SUPERVISORS' SOCIAL INFLUENCE, SELF-EFFICACY,
AND ACCULTURATION IN CROSS-CULTURAL DYADS
OF CLINICAL SUPERVISION

by

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To my parents, JongHoon Chung and ChunJa Shin

APPROVAL PAGE

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TABLE OF CONTENTS

	Page
LIST OF TABLES	viii
LIST OF FIGURES	x
 CHAPTER:	
I. INTRODUCTION.....	1
Overview of Related Literature	3
Purpose of the Study	10
Statement of the Problem.....	10
Research Questions	11
Need for the Study	12
Definition of Terms.....	12
Overview of Remaining Chapters.....	14
II. LITERATURE REVIEW	16
International Students	16
International Students in the United States	16
International Students in U.S. Counseling Programs.....	18
Representation of international students	19
General experiences as international students	20
Experiences as international doctoral students	22
International Students as Supervisees	23
International Students as Supervisors	28
Clinical Supervision.....	29
Cross-Cultural Dyads of Clinical Supervision.....	30
Ethnic Minority Supervisors in Cross-Cultural Dyads of Clinical Supervision.....	31
Social Influence	34
Strong's Social Influence Model	34
Social Influence in Clinical Supervision.....	36

Self-Efficacy	46
Counseling Self-Efficacy	46
Supervisor Self-Efficacy	47
Acculturation.....	52
Acculturation Theory	53
Acculturation and International Students in Clinical Supervision	54
Summary	58
 III. METHODOLOGY	 60
Research Questions and Hypotheses	60
Participants.....	62
Instrumentation	63
Supervisor Rating Form - Short.....	63
Counselor Supervisor Self-Efficacy Scale.....	66
American International Relations Scale.....	68
Demographic Form	73
Procedures.....	73
Data Analysis	74
Correlation Analysis	74
Mediating Path Analysis	75
Multiple Regressions	76
Pilot Study.....	78
Revisions Based on Pilot Study	79
 IV. RESULTS.....	 81
Description of Respondents	81
Preliminary Analyses	86
Descriptive Statistics for All Variables.....	86
Reliabilities of Instruments	88
Main Analyses	89
Testing of Research Hypothesis.....	89
Research Questions 1	89
Research Hypothesis 1	90
Research Question 2	91
Research Hypothesis 2.....	91
Research Question 3	92

Research Hypothesis 3.....	92
Research Questions 4.....	93
Research Hypothesis 4.....	93
Research Question 5	103
Research Hypothesis 5.....	104
Additional Analyses.....	106
Descriptive Statistics for Selected Subgroups	106
Correlation Matrix for the Study Variables	110
Summary	111
V. DISCUSSION	112
Overview.....	112
Interpretation of the Study Findings	113
Limitations	120
Directions for Future Research	122
Implications for Counselor Educators and Supervisors.....	124
For Counselor Educators and Clinical Supervisors	125
For International Supervisors.....	126
Conclusion	126
REFERENCES	128
APPENDIX A: INSTRUCTIONS AND INFORMED CONSENT.....	146
APPENDIX B: INSTRUMENTATION.....	158

LIST OF TABLES

	Page
Table 1: Research Hypotheses, Variables, and Data Analyses.....	78
Table 2: Participants Demographics	83
Table 3: Sample Score Ranges, Means, and Standard Deviations	87
Table 4: Descriptive Statistics by Type of Counseling Program.....	87
Table 5: MANOVA: Main Effects of Type of Counseling Program	88
Table 6: Instrument Scale Reliabilities	89
Table 7: Correlation Matrix between Supervisor Self-Efficacy and Social Influence Variables.....	90
Table 8: Correlation Matrix between the AIRS Subscales and Social Influence Variables.....	92
Table 9: Correlation Matrix between Supervisor Self-Efficacy and the AIRS Subscales	93
Table 10: Correlation Matrix between the AIRS, the CSSES, and the SRF-S	100
Table 11: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Perceived Prejudice and Expertness	101
Table 12: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Perceived Prejudice and Attractiveness	101
Table 13: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Perceived Prejudice and Trustworthiness	102
Table 14: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Acculturation and Expertness	102

Table 15: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Acculturation and Attractiveness.....	102
Table 16: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Acculturation and Trustworthiness	102
Table 17: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Language Use and Expertness	103
Table 18: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Language Use and Attractiveness.....	103
Table 19: Multiple Regression: Supervisor Self-Efficacy as a Mediator of Language Use and Trustworthiness	103
Table 20: Multiple Regression: Predictors of Expertness.....	104
Table 21: Multiple Regression: Predictors of Attractiveness	105
Table 22: Multiple Regression: Predictors of Trustworthiness	105
Table 23: Multiple Regression: Predictors of Supervisor Self-Efficacy	106
Table 24: Total and Compared Means between Selected Subgroups of Self-Identified “Person of Color” and “White”	107
Table 25: Total and Compared Means Selected Subgroups divided by Length of Time Lived in the U.S.	108
Table 26: Total and Compared Means Selected Subgroups divided by Supervision Experience.....	109
Table 27: Total and Compared Means Selected Subgroups divided by Acculturation Level.....	110

LIST OF FIGURES

	Page
FIGURE 1: Mediation Model	61
FIGURE 2: Three Paths of Mediating Relationship	75
FIGURE 3: Hypothesized Mediation Model 1: Perceived Prejudice and Expertness.....	94
FIGURE 4: Hypothesized Mediation Model 2: Perceived Prejudice and Attractiveness	95
FIGURE 5: Hypothesized Mediation Model 3: Perceived Prejudice and Trustworthiness.....	95
FIGURE 6: Hypothesized Mediation Model 4: Acculturation and Expertness.....	96
FIGURE 7: Hypothesized Mediation Model 5: Acculturation and Attractiveness	96
FIGURE 8: Hypothesized Mediation Model 6: Acculturation and Trustworthiness	97
FIGURE 9: Hypothesized Mediation Model 7: Language Use and Expertness.....	97
FIGURE 10: Hypothesized Mediation Model 8: Language Use and Attractiveness	98
FIGURE 11: Hypothesized Mediation Model 9: Language Use and Trustworthiness	98

CHAPTER I

INTRODUCTION

International doctoral students and international counselor educators in graduate programs accredited by the Council for Accreditation of Counseling and Related Education Programs (CACREP) are underrepresented, although their numbers are growing rapidly. According to a recent survey (Ng, 2006b), about 53% of 45 CACREP-accredited doctoral programs reported international students enrolled during the spring semester 2006. As future counselor educators, international doctoral students face unique issues which might impact their professional development in areas of clinical training, including clinical supervision.

Clinical supervision can be a challenging area for international supervisors due to perceived differences in cultural values, social norms, and linguistic nuances in the cross-cultural supervisory relationship (D'Andrea & Daniels, 1997). Although novice supervisors experience feelings of anxiety and confidence in general (Watkins, 1990), international supervisors might feel even more anxious and less confident as outsiders in the U.S. culture supervising U.S.- born supervisees. To date, however, researchers (Killian, 2001; Mittal & Wieling; 2006; Nilsson & Anderson, 2004; Nilsson & Dodds, 2006; Nilsson 2007) have focused primarily on international students as counselors-in-training or supervisees. Nevertheless, these studies may suggest important variables to be addressed in investigations of international supervisors.

Killian (2001) emphasized the importance of the supervisory relationship for international supervisees, who must feel safe and trust their supervisors for a productive dialogue to take place on culture and other related counseling issues. Nilsson and Anderson (2004) suggested that cultural discussions can be an effective way to enhance trust, safety, and the working alliance in supervision with international students. They found that less acculturated international supervisees reported lower levels of counseling self-efficacy, weaker supervisory working alliances, and more role ambiguity, yet more need to discuss diversity issues (e.g., race, ethnicity, communication style, and social norms) in supervision. Similar to Nilsson and Anderson (2004), Nilsson and Dodds (2006) examined the relationship between supervisees' acculturation levels and the amount of cultural discussion with international students using the International Student Supervision Scale (ISSS). Their results suggested important within group variations: international student supervisees from Africa, Asia, and South/Central America needed more cultural discussion to manage their challenges concerning cultural adjustment (e.g., feelings of inferiority, language difficulties, heavy workloads, social isolation, limited finances, cultural norm differences, role conflicts, and racial discrimination) compared to supervisees from Europe, Canada, and Australia.

Mittal and Wieling (2006) conducted in-depth interviews with 13 international doctoral students in U.S. marriage and family therapy programs. Their findings revealed that international doctoral students struggled to have confidence in counseling clients due to their perceived differences, such as spoken language and physical appearance based on their racial/ethnic/international origins.

Although the studies described earlier in this chapter were focused on International supervisees, the results suggest variables that also might impact supervision for international supervisors, particularly international doctoral students and international counselor educators. In addition, similar variables and struggles might impact international supervisors' perceptions related to conducting supervision, such as their self-confidence (Liu, Chung, & Crowell, 2006), as well as their abilities to influence supervisees to make needed changes in their thoughts or/and attitudes.

Overview of Related Literature

Integrating social psychological perspectives with psychotherapeutic research (Frank, 1961; Goldstein, Heller, & Sechrest, 1966; Levy, 1963; Strong, 1968), social influence theory was first introduced to explain therapeutic changes in counseling and psychotherapy (Heppner & Claiborn, 1989). Strong (1968) suggested a two-phase model of counseling based on the findings of opinion-change research in social psychology. He noted that both opinion-change and the counseling process emphasize behavioral changes frequently caused by verbal communication. In the first phase of Strong's model, the primary communicator (i.e., counselor) tries to establish his or her credibility, such as expertness, attractiveness, and trustworthiness. In the second stage, the primary communicator (i.e., counselor) uses his or her credibility to influence the secondary communicator (i.e., client) to make appropriate behavioral or attitudinal changes.

Expertness is the perception of a communicator as a valid resource based in his or her specialized training, rational and knowledgeable arguments, confidence, and reputation as an expert. *Attractiveness* is the degree to which the communicator is perceived as

compatible or similar to the hearers in personal background and opinions.

Trustworthiness refers to perceptions of the communicator's honesty, social role, sincerity, openness, and lack of motivation for personal gain (Strong, 1968).

Strong's (1968) social influence theory and variables (i.e., expertness, attractiveness, and trustworthiness) also have particular relevance to the supervision process, and have been supported empirically (e.g., Heppner & Handley, 1981). However, similar to studies of international students in counseling programs, previous research on the social/interpersonal influence process in supervision primarily has been focused on supervisees' perspectives, such as supervisees' perceptions of supervision satisfaction, supervisory relationship quality, supervisory working alliance, and supervisee performance (Allen, Szollos, & Williams, 1986; Carey, Williams, & Wells, 1988; Heppner & Handley, 1981; Heppner & Roehlke, 1984; Friedlander & Synder, 1983; Schulz, Ososkie, Fried, Nelson, & Bardos, 2002). Nevertheless, these studies may inform studies of social/interpersonal influence from supervisors' perspectives.

Heppner and Handley (1981) examined the relationship between practicum students' perceptions of their supervisors' social influence characteristics (i.e., expertness, attractiveness, and trustworthiness) and supervisory relationship quality and satisfaction with supervision. They found that perceived attractiveness and trustworthiness were associated with positive supervisory relationships and supervision satisfaction for the beginning counselor trainees.

Friedlander and Synder (1983) and Heppner and Roehlke (1984) investigated the relevance of the three social influence characteristics for three different groups of

counseling practicum students (i.e., beginning practicum students, advanced practicum students, and pre-doctoral interns). They reported that the significance of the three characteristics differed across supervisee training experiences. For example, counseling practicum students in general expected supervisors to be more trustworthy than expert and more expert than attractive (Friedlander & Synder). Supervisors' social influence characteristics (i.e., expertness, attractiveness, and trustworthiness) were more important to participants who were at early developmental levels (i.e., beginning and advanced practicum students) than those at later developmental levels (i.e., pre-doctoral interns) (Heppner & Roehke, 1984).

Allen et al. (1986) studied the worst and best supervisory experiences of graduate students in advanced clinical and counseling psychology programs. Their findings indicated that perceived expertness and trustworthiness of the supervisors contributed to the quality of supervision experiences, regardless of supervisees' prior experiences, gender, or theoretical orientations.

Carey et al. (1988) examined relationships between perceptions of practicum supervisors' social influence characteristics and supervisees' performance, such as client outcomes and professional development. Their results indicated that perceived trustworthiness was positively associated with both supervisory relationship ratings and supervisee performance variables.

Schulz et al. (2002) examined perceptions of the quality of the supervisory alliance with rehabilitation counselors. Their results suggested that the more supervisors use their expertness and attractiveness, the stronger the supervisory working alliance may

be. Some of these results are somewhat contradictory (e.g., results by supervisees' developmental level or their experiences), but they indicated that supervisors' social influence variables (i.e., expertness, attractiveness, and trustworthiness) do affect supervisees' perceptions of the supervisory relationship as well as their professional outcomes.

Within social psychological viewpoints, interpersonal power can be understood as one's capability to influence behaviors of others whom he or she has relationships with (Bernard & Goodyear, 2004). Thus, individuals give interpersonal influence to those who they perceive to have the resources for meeting their needs (Strong, 1968). International supervisors may experience difficulties in using their interpersonal influence due to feeling underestimated by their supervisees, similar to other minority supervisors (Priest, 1994).

Supervisees tend to accept supervision input based on the level of the supervisor's knowledge, the degree of shared meaning with the supervisor, and the potential belief in building a trusting relationship with the supervisor (Kaiser, 1997). When supervisors' cultural differences were perceived by supervisees, it could contribute to the development of supervisors' interpersonal influence. Thus, similar to U.S. - born minority supervisors, international supervisors may present themselves in a way to "prove" (Priest, 1994, p. 154) their professional knowledge (expertness), mutual understanding (attractiveness), and safe relational environment (trustworthiness) to the supervisees.

Liu, Chung, and Crowell (2006) reported an anecdotal study of supervision experiences of two international doctoral students in two CACREP-accredited counseling

programs. Similar to Priest (1994), Liu et al. reported that the biggest challenge of international doctoral students was being underestimated as a supervisor due to a language barrier, different communication style, or different cultural norms. The international students, however, also reported that the best reward in supervision was to contribute different cultural perspectives to their supervisees based on their unique cultural backgrounds and cross-cultural transition experiences.

Since social influence theory has been suggested as an effective way to understand the supervisory relationship (Bartlett, 1983; Bernard & Goodyear, 2004; Neufeldt, Beutler, & Banchemo, 1997), it is a potentially promising way to understand supervision experiences of international supervisors. In transitioning from the role of supervisee to supervisor, due to their unique issues, international doctoral students experience multiple challenges which might affect their perceptions of self as influential supervisors in cross-cultural dyads of clinical supervision. Relatively new international counselor educators might experience similar challenges as supervisors in their new work environment.

According to Strong's (1968) model, the supervisor has interpersonal influence in promoting supervisees' professional development (Bernard & Goodyear, 2004). Within the supervisory context, *expertness* can be defined as the supervisor's knowledge or authority on a supervisory topic, such as a supervisee's clinical skills and client issues. *Attractiveness* can be defined as similarity with the supervisee's important dimensions, such as personal background and opinion. *Trustworthiness* can be defined as the supervisor's professional ability to create safe and reliable supervisory relationships

(Bernard & Goodyear, 2004). Although these three social influence constructs clearly are relevant to supervision (e.g., Heppner & Roehlke, 1984; Schulz et al., 2002), they may have some specific connotations for international supervisors. For example, supervisor expertness can be closely related to supervisors' self-efficacy since, as supervisors develop their expertise, their level of self-efficacy related to supervision increases (Barnes, 2002; Stoltenberg, McNeill, & Delworth, 1998; Watkins, 1990). In other words, supervisor self-efficacy can be a critical element in understanding how international supervisors establish, develop, and present *expertness*.

According to Goodyear (1998), supervisor self-efficacy affects "the extent, type, and impact of a supervisor's social influence" (p. 280). For instance, novice supervisors with low self-efficacy, such as doctoral student supervisors, may choose expertness as a primary resource they believe they need to develop the most because they do not perceive themselves as an expert in supervision relationships (Barnes, 2002). Experienced supervisors with high self-efficacy, on the other hand, may not emphasize their expertness as much as novice supervisors do because they believe that they possess enough expert capability to influence their supervisees. Like most novice supervisors, relatively new international supervisors also may experience different levels of confidence and anxiety which might affect their self-efficacy (Watkins 1990), but even more so due to their concerns about language, cultural differences, and other issues.

Similarly, international supervisors' acculturation level might be related to their *attractiveness* since, as international supervisors adjust themselves to U.S. culture, their perceived compatibility or similarity to their supervisees might increase. For example,

more acculturated supervisors may emphasize their attractiveness less because they believe that they possess less “shared-meaning difference” (Kiaser, 1997, p. 152) in the supervisory relationship. Less acculturated supervisors, on the other hand, may emphasize their attractiveness more because they do not perceive themselves as attractive enough due to a lack of similarity with supervisees’ important dimensions.

The potential relationship between trustworthiness and other supervisor variables is not as clear to those of expertness and attractiveness. However, since trustworthiness seems rooted in skills learned in U.S. counselor training programs, international supervisors’ trustworthiness might be related to both their acculturation and self-efficacy levels. For instance, as more acculturated international supervisors were willing to receive new professional training in the U.S., their confidence and self-efficacy levels might be higher. International supervisors with high self-efficacy might focus more on their supervisees than themselves in the supervisory relationship since they might be less concerned about mistrust due to differences of shared-meaning: beliefs, values, and skills as a counselor, similar to their supervisees. Thus, more acculturated international supervisors with high levels of self-efficacy may emphasize their trustworthiness less because they believe that they possess professional abilities to create safe and reliable supervisory relationships. In short, self-efficacy might serve as a mediating role the relationship between international supervisors’ acculturation and their three social influence variables.

Purpose of the Study

Researchers (e.g., Nilsson & Anderson, 2004; Nilsson & Dodds, 2006; Nilsson, 2007) have addressed issues of supervision with international populations in U.S. counseling programs, but they have not included international supervisors' perspectives. Since supervisors' cultural backgrounds can influence supervision context, process, and outcomes (Bernard & Goodyear, 2004; Brown & Brown-Landrum, 1995), it is important to understand the relationship between international supervisors' cultural factors and their supervisor credibility. International supervisors share common struggles or other similarities in their supervision experiences, but they are not a homogeneous group (Nilsson & Dodds, 2006). Thus, within group variables, such as non-English speaking countries vs. English speaking countries and racial appearance (persons of color vs. non-persons of color) needed to be considered in examining the proposed relationship.

Thus, the overall purpose of this study was to fill in the gaps in the literature by exploring international supervisors' experiences as supervisors in cross-cultural dyads of clinical supervision. In particular, this study was designed to examine the relationship between international supervisors' social influence variables, supervisor self-efficacy, and acculturation levels. In addition, the purpose was to investigate demographic predictors of international supervisors' supervisor credibility (i.e., social influence, supervisor self-efficacy).

Statement of the Problem

To address the identified gap in the literature, this study investigated how international supervisors perceived their interpersonal credibility in influencing U.S.-born

supervisees. In this study, the relationships between international supervisors' social influence variables, supervisor self-efficacy, acculturation levels, and demographic factors in cross-cultural dyads of clinical supervision were examined. Specifically, this study specifically addressed the following research questions:

Research Questions

1. Is there a strong linear correlation between the levels of international supervisors' self-efficacy and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?
2. Is there a strong linear correlation between international supervisors' levels of acculturation and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?
3. Is there a strong linear correlation between international supervisors' perception of their self-efficacy and their acculturation levels in cross-cultural dyads of clinical supervision?
4. Is the strong linear correlation between international supervisors' acculturation and their social influence variables mediated by their self-efficacy in cross-cultural dyads of clinical supervision?
5. To what extent do international supervisors' gender, their first language preference (i.e., English vs. non-English), and their perceived racial appearance (i.e., "Person of color" vs. "White") predict their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

Need for the Study

Strong's (1968) social influence model is a relevant framework for understanding the relationship between international supervisors' perceptions of their social influence (i.e., expertness, attractiveness, and trustworthiness), supervisor self-efficacy, and acculturation. By examining the proposed relationships, this study may help international supervisors not only enhance their awareness of the interpersonal influence they possess but also use that influence to maximize their effectiveness in cross-cultural supervisory relationships.

Better understanding of the multiple factors impacting international supervisors' perceptions of their supervisor credibility could help counselor educators be more effective in developing the professional abilities of international doctoral supervisors. It also could be useful for doctoral counseling students in increasing awareness of cross-cultural interactions in the supervision context. This study might assist international supervisors in maximizing their supervisor credibility as supervisors considering their cultural factors. Finally, the study may help international supervisors increase the influence on their supervisees in effective ways.

Definition of Terms

International supervisors were counseling doctoral students or international counselor educators who are not U.S.- born, who graduated or were enrolled in U.S. counseling doctoral programs, and who had had at least one semester of experience as a clinical supervisor with U.S.- born supervisees.

Supervisor self-efficacy refers to a supervisor's beliefs in her or his ability to perform supervision activities, as described by Bandura (1997). For the purposes of this study, supervisor self-efficacy was measured by The Counselor Supervisor Self-Efficacy Scale (CSSES; Barnes, 2002).

Acculturation is defined as individuals' behavioral and psychological reactions when they encounter a secondary culture. For the purposes of this study, acculturation was measured by The American-International Relations Scale (AIRS; Sodowsky & Plake, 1991, 1992).

Cross-cultural dyads of supervision are supervisory relationships in which the supervisor and the supervisee come from different cultural backgrounds. For the purposes of this study, cross-cultural dyads of supervision were defined as dyads between internationally-born supervisors and U.S.-born supervisees.

Expertness is a construct in social influence theory. Expertness is the perception of the primary communicator as a valid resource, which is influenced by specialized training, rational and knowledgeable arguments, confidence, and reputation as an expert in supervision. In this study, expertness refers to international supervisors' perceptions of their knowledge, confidence, and reputation as an expert. For the purposes of this study, expertness was measured by the expertness subscale on the Supervisor Rating Form – Short version (SRF-S; Schiavone & Jessell, 1988).

Attractiveness is a construct in social influence theory. Attractiveness is the degree to which the primary communicator (e.g., supervisor) is perceived as compatible or similar to the secondary communicator (supervisee) in personal background and

opinions. In this study, attractiveness was defined as international supervisors' perceptions of their compatibility and similarity to their supervisees. For the purposes of this study, attractiveness was measured by the attractiveness subscale on the Supervisor Rating Form – Short version (SRF-S; Schiavone & Jessell, 1988).

Trustworthiness is a construct in social influence theory. Trustworthiness is the perception of a communicator's honesty, social role, sincerity, openness, and lack of motivation for personal gain. In this study, trustworthiness refers to supervisors' self-perceptions of their honesty, social role, sincerity, openness, and lack of motivation for personal gain. In this study, trustworthiness was measured by the trustworthiness subscale of the Supervisor Rating Form – Short version (SRF-S; Schiavone & Jessell, 1988).

First language refers to non-English language which international supervisors primarily use.

Overview of Remaining Chapters

This study is composed of five chapters. Chapter I provided an overview of the current state of international doctoral students and international counselor educators as supervisors and the need for the current study for counselor educators and advanced clinical supervisors, particularly from a social influence perspective. Chapter II provides a review of scholarly literature related to this topic and the further need for understanding experiences of international supervisors in using social influence variables in cross-cultural dyads of clinical supervision. Chapter III describes the methodology to be used in collecting data regarding international supervisors' perceptions of their social influence

variables as related to identified variables of interest (i.e., self-efficacy, acculturation).

Chapter IV reports the results of data collection and statistical analyses. Chapter V includes a discussion of the results, limitations of the study, and implications for researchers and practitioners.

CHAPTER II

LITERATURE REVIEW

This chapter contains the literature relevant to the current study, organized into the following sections: (a) general description of international students in U.S., (b) training needs of international students in U.S. counseling programs, (c) cross-cultural dyads of clinical supervision and ethnic minority supervisors, (d) social influence theory and variables in clinical supervision, (e) counselor supervisor self-efficacy, and (f) acculturation.

International Students

International Students in the United States

As colleges and universities become more global, studies of the experiences of international students studying in foreign countries continue to increase. The Open Doors annually published by the Institute of International Education (2004-2008) reported an increasing enrollment of graduate students (27.9%) and undergraduate students (13.8%) in 2007-2008, compared with international students enrolled in 2004-2005. In terms of country of origin, most of international students come from India (an increase of 13% from 2006-2007), followed by China (81,127, up 20%), South Korea (69,124, up 11%), Japan (33,974, down 4%), and Canada (29,051, up 3%). Business and Management (20% of total) followed by Engineering (9%), Physical and Life Sciences (9%), Social Sciences

(9%), Mathematics and Computer Science (8%) remain the top five fields of study for international students in the United States. International students' contribution to financial benefits and multicultural learning environment of U.S. higher education has been recognized in recent literature (Ng & Smith, 2009; Ridley, 2004).

Due to experiences of cross-cultural transition from home to the U.S., international students face culture shock in many areas, such as values conflicts, identity confusion, new coping skills, and new physical environments (Arthur, 2004). Two different types of curves (i.e., U-curve, W-curve) have been introduced to explain changes and patterns of international students' culture shock. The U-curve includes three stages: (a) an initial stage (i.e., contact with the host culture with excitement), (b) a crisis stage (i.e., conflict with the host culture experiencing low self-esteem and identity confusion), and c) an adaptation stage (i.e., adapt to the host culture). The W- Curve expanded the U-curve adding a stage of adjustment to the home culture when international students return to their home countries.

Acculturation can be regarded as an extension of culture shock (Pedersen, 1991) which includes internal/external changes and differences when two different cultures encounter each other. Acculturation process causes the challenges and needs for international students in terms of academic development, cross-cultural transition, and mental health wellness (e.g., Arthur & Pedersen, 2008; Mori, 2000; Robertson, Line, Jones, & Thomas, 2000; Singaravelu & Pope, 2006). These challenges result in multiple stressors that international students may face in their general developmental and cultural adjustment process.

Yi, Lin, and Kishimoto (2003) reported the top five areas of concerns for international students who visited a college counseling center: (a) academic (e.g., study skills in new educational system), (b) physical (e.g., miscommunication with a health provider due to insufficient language proficiency), (c) financial (e.g., restricted job opportunities due to strict legal regulations), (d) career (e.g., uncertainty in terms of geographical location), and (e) personal/social (e.g., acculturative stress, spouse issues, communication style differences). The findings of Yi et al. (2003) indicated that younger, female, undergraduate level international students seek counseling services for more career related issues, whereas older, male, and graduate level international students seek counseling services for more personal related issues. In addition, international students in the earlier phase of cultural adjustment have more difficulties than those in the later phase. Yi et al. (2003) introduced four phases of cultural adjustment status based on the length of time international student stay in the U.S. culture and the critical issues they face: 1) pre-arrival, 2) crisis/integration, 3) re-integration, and 4) adaptation and resolution.

In the above section, common and unique concerns of international students experienced in U.S. culture have been briefly introduced. In the next section, general description of international students (i.e., master's and doctoral students) in U.S. counseling programs are summarized. Their experiences and needs pertinent to counseling training also are discussed.

International Students in U.S. Counseling Programs

The number of international students in counseling programs is also growing rapidly. About 49% programs accredited by the Council for Accreditation of Counseling

and Related Education Programs (CACREP) reported a significant presence of international students in 2003-2006. International students were found in at least 53% of CACREP-accredited counseling doctoral programs (Ng, 2006b). Although international students in U.S. counseling programs share common challenges (i.e., language anxiety, adjustment difficulties, and cultural differences) of international students in general, their needs and experiences pertinent to counseling training, such as clinical skills and supervision, are distinctive (Ng & Smith, 2009). In the next section, information about international counseling students is presented in three areas: (a) representation of international students, (b) general experiences as international students, and (b) experiences as international doctoral students.

Representation of international students

Ng (2006b) examined the representation of international students in 101 CACREP-accredited counselor-training programs in the United States. Responses were obtained from all five geographic regions identified by the Association of Counselor Education and Supervision (ACES): (a) North Atlantic - 16 out of 21 programs, (b) North Central - 29 out of 52 programs, (c) Rocky Mountain - 11 out of 16 programs, (d) Southern - 36 out of 73 programs, and (e) Western - 9 out of 16 programs. A total of 96 programs were asked to provide data regarding (a) entire program enrollment and international student enrollment in Spring 2004 based on program level (i.e., master's, educational specialist, doctoral, and post-doctoral) and (b) international student enrollment for the most recent 3 years.

Ng's (2006b) results indicated that international students were enrolled in 73 out of 178 (41%) programs in spring 2004 and 87 out of 178 (48.9%) programs in the most recent three years. Although the absolute number of international students was small, they were present in close to half of CACREP programs. In addition, the enrollment rate of international doctoral students was higher than enrollment of international master's-level students. Ng's (2006b) data indicated that more international students were found in the Southern and North Central regions compared to the North Atlantic, Rocky Mountain, and Western states due to the lower tuition fees and cost of living. In addition, the actual number of CACREP programs in these two regions (i.e., North Central: $n = 52$, Southern: $n = 73$) is higher than that in other regions.

General experiences as international students

Ng (2006a) examined 36 counselor educators' perceptions and experiences in working with international student trainees using an online survey. Participants included 27 Whites, non-Hispanic, 4 African-American, 3 Asians, 1 Native American, and 1 Latino. Participants' teaching experiences ranged from one to 33 ($m = 16$) years. Participants included 12 assistant professors, 11 associate professors, 10 full professors, and one lecturer. Participants had recent training contact with international graduate students (i.e., both master's and doctoral) from Asia/Pacific Islands, Africa, Australia, Canada, Central and South America.

In Ng's (2006a) study, the counselor educators reported that international students from non-Western countries (e.g., Asia, Africa) tended to experience challenges more often than did domestic students. Within group differences were found based on

international students' degree of success (i.e., success in study and counselor training) and country of origin. For example, more successful international students, regardless of their nationalities, seemed more likely to handle problems in academics, mental/emotional distress, and clinical placement, and they were more frequently mentored by their professors than were the less successful international students. Since this study was limited to counselor educators' perceptions, Ng (2006a) noted that further research was needed to include international students' perceptions and experiences in cross-cultural counseling training.

Ng and Smith (2009) investigated international students' perceptions and experiences about their concerns related to their U.S. counseling training. Using an *Areas of concerns and interest* survey (Ng & Smith), a comparison study between 56 international students and 87 domestic students was conducted. *Areas of concerns and interest* were composed of 13 items, using 5-point Likert-type scale (1 = never, 2 = seldom, 3 = sometimes, 4 = often, 5 = all the time) and one item using 4-point Likert-type scale.

Their (Ng & Smith, 2009) results indicated that international students, compared to domestic students, tended to experience a higher level of academic problems (e.g., different learning style in class), English proficiency issues, cultural adjustment problems, social/relational problems with peers (e.g., being isolated or alienated from peers), difficulties in clinical courses (e.g., a "type" of client, such as minority client, is always assigned), problems fitting in at clinical placement/sites (e.g., culturally insensitive supervisor), communication problems with clients due to language barriers, conflicts with

the Westernized mental health approach, discrimination by faculty members (e.g., not being asked questions in class by the professor due to the assumption of not being able to speak clearly), and discrimination by fellow American trainees (e.g., feeling minimized or disregarded by peers).

Experiences as international doctoral students

Ng and Smith (2009) suggested that international students in U.S. counseling programs are faced with the dual assignments of not only learning in a Westernized training environment, but also transforming that learning into their own cultural and ethnic worldview. They also proposed that international doctoral students might experience more difficulties in their graduate training since doctoral-level work assumes more rigorous expectations as well as greater levels of critical thinking and analysis compared to the master's level. Thus, the authors noted that further research is needed to examine the impact of dual roles of international students during and after their counseling training. It also could be stated that future work is needed to investigate specific training areas, such as clinical supervision, where international doctoral students face more challenges than master's level students due to different levels of program expectations.

Experiences of only doctoral-level international students enrolled in marriage and therapy training programs were explored focusing on the areas of theory, clinical training, supervision, practice, and research (Mittal & Wieling, 2006) with a qualitative approach. Analysis of 13 in-depth individual interviews revealed that most doctoral-level

international students experienced some adjustment problems, wanted more academic and career support, and desired increased recognition for their cultural differences.

In sum, the research on international graduate students in U.S counseling programs has begun to provide a better understanding of their needs and experiences in counselor training. Some similarities and differences in training needs and experiences were presented in a few comparison studies (e.g., Ng & Smith, 2009) of international and domestic students in U.S counseling programs. It was noted that international students' experiences and perceptions of certain issues may be different depending on their program level (e.g., master's-level, doctoral- level), areas of training, degree of success, and country of origin. International students' experiences as both *supervisees* and *supervisors* are reviewed in the next section.

International Students as Supervisees

There is a small but growing body of research on international students as *supervisees*. In the supervision literature, supervisees' cultural status (i.e., acculturation level, language difficulties, and different values) and its impact on other supervisory variables, including counselor self-efficacy, supervisory working alliance, frequency and length of cultural discussion, role ambiguity, communication style differences, supervision satisfaction, preferred supervisory relationship, and preferred supervisors' characteristics, have been considered in examining the training needs of international students as *supervisees*.

Nilsson (1999) conducted a comparison study between international doctoral students, U.S. majority doctoral students, and U.S. minority students on counseling self-

efficacy, role ambiguity, and supervisory working alliance as *supervisees* in APA-accredited programs. In general, international supervisees ($n = 321$) indicated less counseling self-efficacy than U.S. majority supervisees and less role ambiguity than U.S. minority supervisees. Interestingly, international supervisors with higher levels of acculturation reported more counseling self-efficacy and less role ambiguity. Therefore, these results revealed that acculturation impacted international students' experiences as supervisees.

Similar findings were reported by Nilsson and Anderson (2004). Using the same instrument (AIRS; Sadowsky & Plake, 1991) as Nilsson's previous study, Nilsson and Anderson investigated the role of acculturation on counseling self-efficacy, supervisory working alliance, role difficulties, and discussion of cultural issues in supervision among 42 international students from APA-accredited professional psychology programs. Participants came from Asia ($n = 16$, 40%), Europe ($n = 10$, 21%), South America ($n = 8$, 19%), North America ($n = 6$, 14%), from Africa ($n = 1$, 2%), and from Australia ($n = 1$, 25), representing 20 countries and 6 continents. The majority of participants ($n = 32$, 76%) were enrolled in their doctoral training with degrees earned (i.e., master's or bachelor) in the U.S. More than half of them were female ($n = 26$, 62%). Participants reported their time of stay in the U.S. as less than 3 years for 20%, between 3 and 5 years for 29%, between 5 and 8 years for 31%, and more than 8 years for 17%.

Nilsson and Anderson's (2004) study revealed the following information: (a) supervisees' acculturation levels predicted their counseling self-efficacy; (b) supervisees feeling more rejected (measured by the AIRS-Perceived Prejudice subscale) by people in

the U.S. was associated with a weaker supervisory working alliance, more role ambiguity, and more discussion of cultural issues in supervision; (c) supervisees' acculturation level was more positively associated with the rapport between supervisors and supervisees than supervision focus on the client; and (d) supervisees' preference for using English (measured by the AIRS-Language Use) was positively associated with the supervisory working alliance, role ambiguity, and needs of cultural discussion in supervision.

Nilsson and Dodds (2006) supported Nilsson and Anderson's studies (2004) reporting the findings of their proposed International Student Supervision Scale (ISSS), including item development and exploratory factor analysis. The relationships between the ISSS and the AIRS, the ISSS and supervisee variables (i.e., time spent in the U.S., country of origin, satisfaction with supervision, perception of supervisors' level of sensitivity to diversity issues), and the ISSS and supervisors' race/ethnicity were explored. Participants were 115 international students from counseling psychology programs. The majority ($n = 91$, 79%) were enrolled in APA-accredited programs and 21% (i.e., master's: $n = 7$, doctoral: $n = 17$), were enrolled in CACREP-accredited programs. The sample represented 39 countries and 6 continents: Asia/Middle East, 37%; Europe, 28%; Central/South America/Caribbean, 15%; North America, 14%; Africa, 4%; and Australia, 3%. Participants had been in the U.S. for less than 1 year ($n = 9$, 10%), between 1 and 3 years ($n = 22$, 25%), between 3 years and 5 years ($n = 31$, 27%), between 5 and 8 years ($n = 26$, 30%), and for more than 8 years ($n = 6$, 14%).

Nilsson and Dodds (2006) revealed that less acculturated supervisees needed more discussion of cultural issues in supervision and felt more culturally competent than

their White supervisor. Furthermore, more discussion of culture in supervision was related to supervisees' greater satisfaction with supervision, including higher ratings on supervisors' multicultural sensitivity. Interestingly, more discussion of cultural issues in supervision happened with supervisors of color even though there was no difference found between supervisors of color and White supervisors in scoring supervisees' cultural knowledge. Results also indicated that supervisees from Africa, Asia, and South/Central America reported more discussion of cultural issues than those from Europe, Canada, and Australia.

Mittal and Wieling (2006) conducted a qualitative study of 13 international doctoral students enrolled in marriage and therapy programs in the U.S. to examine their experiences across theory, research, and clinical training, supervision, and practice. Participants were asked specific questions, such as "how do you feel about the training you have received thus far?" (p. 372) through telephone interviews ($n = 9$), face-to-face interviews ($n = 3$), and email survey ($n = 1$). Participants represented 8 countries: India ($n = 4$), Mexico ($n = 2$), Malaysia ($n = 2$), Germany ($n = 1$), Canada ($n = 1$), Japan ($n = 1$), Iran ($n = 1$), and South Africa ($n = 1$), and were enrolled in seven of the 13 accredited MFT programs in the U.S. Only 15% of participants identified English as their first language, whereas nearly 46% of them identified English not as their primary language.

Based on the findings of Mittal and Wieling (2006), four aspects of international doctoral students' supervision experiences were revealed: (a) culturally insensitive supervision (e.g., negative experience - faculty supervisors' racial comments); (b) supportive supervision (e.g., positive experiences - faculty supervisor's positive

compliment, being treated as a big contributor in counseling process); (c) discussion based on nationality (e.g., positive experience – discussion of diversity, negative experiences - no discussion of being a “person of color”, forceful conversation about own culture); and (d) content of supervision (e.g., positive experience - focus on the self, negative experience – not much attention to international students). This finding is consistent with previous findings on the relationship between cultural discussion and supervision satisfaction (Nilsson & Dodds, 2006) in which discussion of culture in supervision contributed to positive supervision experiences of international doctoral students as supervisees.

A recent study (Mori et al, 2009) replicated previous findings (Nilsson & Anderson, 2004; Nilsson & Dodds, 2006, Nilsson, 2007) regarding the role of acculturation in the degree of cultural discussion and satisfaction with supervision. International supervisees ($n = 104$), including both doctoral and master’s level students (i.e., doctoral: $n = 72$, 63%, master’s: $n = 22$, 19%, and unknown: $n = 10$, 33%) from various clinical programs, were used to investigate the impact of acculturation and cultural discussion on supervision satisfaction. Results indicated that more acculturated international students with greater cultural discussion expressed greater satisfaction with supervision. A discussion of cultural issues in supervision partially mediated the relationship between supervisees’ perceptions of supervisors’ cultural competence and their satisfaction with supervision. Although international students share common experiences as foreign students in the U.S., supervision experiences might be different between supervisees and supervisors due to difference in role expectations and

developmental levels. Thus, literature review on international doctoral students as supervisors follows.

International Students as Supervisors

Unlike studies on international students as supervisees, only one empirical study (Killian, 2001) on experiences of international students as *supervisors* was found. Moreover, no studies of international counselor educators as *supervisors* were located. In addition to the general developmental problems and culture/adjustment related issues, international doctoral counseling students likely experience some unique challenges as well as culture related issues. Due to perceived cultural factors, international doctoral students might feel more challenged in working with U.S.-born supervisees. It has been noted that supervisors experience high level of anxiety and low confident in their earlier stage of supervisor development (Steward, 1998; Watkins, 1990). However, international students may feel more anxious and less confidence than general beginning supervisors due to their concerns related perceived cultural differences in language, values, communication style, and social norms. This would be line with the findings of Mittal and Wieling (2006): international doctoral students in marriage and family therapy programs struggled with confidence as counselors due to their concerns about clients' perceptions of their physical appearance and spoken language proficiency.

Doctoral students in counseling programs often are engaged with master's level students in an authoritative role, such as supervisors (Scarborough, Bernard, & Morse, 2006). Furthermore, doctoral students in counselor educator preparation often serve a dual role as both supervisors for master's level students and supervisees for counselor

educators (e.g., faculty members) (Herlihy & Corey, 1997; Scott, Ingram, Vitanza, & Smith, 2000). Being in a dual relationship or multiple relationships could bring confusion about roles, violation of boundary, and imbalance of power to both people (e.g., supervisors and supervisees) (Bernard & Goodyear, 200; Kolbert, Morgan, & Bernard, 2002). International doctoral students may perceive a dual relationship (i.e., supervisory relationship) more challenging than U.S. doctoral students, in which they may expect to experience challenges in establishing proper boundaries due to different cultural and social norms from their supervisees. In addition, international doctoral student supervisors from hierarchical cultures may also be confused in balancing power differences in supervisory relationships.

Priest (1994) suggested that minority supervisors may develop a sense of a need to “prove” themselves due to perceived prejudice about their clinical capabilities. Thus, international supervisors may be concerned about being underestimated by their supervisees due to their minority status, including first languages, preferred communication styles, and cultural norms (Killian, 2001; Liu, Chung, & Crowell, 2006). This might coincide with ethnic minority supervisors’ tendencies to prove their professionalism, in which they accumulate knowledge and skills to obtain approval for the professional “circle” (Killian, 2001, p. 74).

Clinical Supervision

Although clinical supervision likely is a challenging area for international doctoral students due to their perceived differences and anxiety as novice supervisors, it also may be an essential area for their development. The supervision process can provide

rich opportunities for counselor educators in assessing international students' cultural adjustment status, including acculturation stress and social isolation. Likely, almost every supervisory dyad is a cross-cultural dyad for international doctoral students. To inform this study, the broader literature on cross-cultural dyads in supervision was consulted. This section introduces cross-cultural dyads of clinical supervision and possible supervisory issues focusing on ethnic minority supervisors' perspectives.

Cross-Cultural Dyads of Clinical Supervision

Cross-cultural dyads of clinical supervision involve supervisory relationships in which the supervisor and the supervisee come from different cultural backgrounds. Both cultural backgrounds of supervisors and supervisees have an impact on the content, process, and outcome of clinical supervision (Bernard & Goodyear, 2004; Brown & Brwon-Landrum, 1995; Garrett, Borders, Crutchfield, Torres-Rivera, Brotherton, & Curtis, 2001; Nilsson & Duan, 2007). In addressing cultural issues during supervision, most researchers have emphasized both early discussion and ongoing conversations about its impact on the supervisory relationship (Borders, 2005; Estrada, Frame, & Williams, 2004; Garrett et al., 2001; Hird, Cavalieri, Dulko, Felice, & Ho, 2001). Thus, when cultural backgrounds are inconsistent, cross-cultural supervisory relationships can be more conflicting and bring more unproductive training experiences than homogeneous relationships (Cook & Helms, 1988; Guiterrez, 1982).

There is limited literature on the cross-cultural supervisory relationship, and only a few studies focused on the experiences of ethnic minority supervisors were found (Duan & Roehlke, 2001; Killian, 2001). In the next section, possible supervisory issues

and concerns that ethnic minority supervisors may face in cross-cultural dyads of clinical supervision are reviewed.

Ethnic Minority Supervisors in Cross-Cultural Dyads of Clinical Supervision

Priest (1994) provided an overview of possible supervisory issues and concerns when ethnic minority supervisors are working with those who are considered ethnic majority supervisees. Priest (1994) suggested recommendations for ethnic minority supervisors in dealing with cross-cultural supervisory issues: (a) enhancing supervisees' respect for diversity; (b) increasing supervisors' own cultural awareness (e.g., own beliefs, attitudes, perceptions, and feelings toward certain culture); (c) addressing supervisees' misconceptions (e.g., underestimation of supervisors' credibility, racial misconception of client); and (d) considering differences in preferred communication styles (e.g., the implementation of silence, facial expressions, tone of voice, and waiting time for response). Since international students share ethnic minority status, some of these issues may apply to international supervisors.

Duan and Roehlke (2001) explored the perceptions of supervisors and supervisees in cross-racial supervision dyads. Using the Cross-Racial Supervision Survey (both scaled items and open-ended questions developed by the researchers), 60 supervisees (40 men and 20 women) and 58 supervisors (30 men and 28 women) in university counseling center internships were surveyed. Seventeen supervision dyads included ethnic minority supervisors working with White supervisees, whereas 43 dyads included White supervisors working with ethnic minority supervisees. The findings of the study revealed that supervisors reported making more efforts than supervisees perceived in addressing

cultural differences, working collaboratively to understand each one's culture, and accepting the power difference. In addition, supervisors' supervision satisfaction was positively related to (a) their own positive attitudes toward their supervisees, (b) their perceptions of supervisees' comfort levels with self-disclosure, and (c) the degree of their perceptions of their expertness, helpfulness, and trustworthiness as supervisors.

Killian (2001) examined how differences in culture of origin affected supervisory relationships. He conducted 12 individual interviews with 6 supervisors and 6 supervisees who had experienced cross-cultural supervisory relationships in the marriage and family field. Three supervisor participants were members of an ethnic minority: one Latina woman from Mexico, a black male of mixed ancestry from South America, and a white, Persian woman from the Middle East. Interview results were analyzed into five categories: (a) supervisor/supervisee cultural identity, (b) issues and challenges in supervision, (c) finding common ground, (d) recommendations for cross-cultural supervision, and (e) supervisor sensitivity.

In terms of cultural identity, the three supervisors from other countries showed some salient differences in cultural assumptions, but they demonstrated it in different ways based on years of stay in the U.S. and degree of their adjustment to the U.S. culture. Regarding issues and challenges in supervision, the Mexican supervisor shared her efforts to accumulate counseling knowledge and skills in verifying her professionalism. This coincides with theoretical suggestions (Priest, 1994). The supervisor from South America expressed his challenge in clarifying and discussing cultural context (i.e., not U.S. culture) which his international supervisees would be practicing eventually. The

supervisor from South America commented that a “both perspectives” (p. 80) – searching for uniqueness and commonality across cultural context can be useful for finding common ground in cross-cultural supervisory relationships. This common ground may provide opportunities to reduce “shared meaning differences” (Kaiser, 1997) between ethnic minority supervisors and ethnic majority supervisees.

The Mexican supervisor emphasized supervisors’ cultural sensitivity and the collaborative supervisory process when working with culturally different supervisees. She shared her learning about cultural sensitivity when placing ethnic majority supervisees in the supervision “hot seat”:

... what I have done in the past is to ask the supervisee how he feels about being supervised by someone who is not white. I have an issue with that approach because if I ask you how you feel about me, I’m putting myself in the center and I’m making you wiggle and explain to me how you feel... I now think the way to do it would be something like sharing with you how uncomfortable or comfortable what I am experiencing is in that process, and then gingerly invite you to do the same ... (p. 83 - 84)

In sum, this section has reviewed possible factors (both rewarding and challenging) that may affect cross-cultural supervisory relationships. Studies of cross-cultural dyads in clinical supervision revealed potential areas for development rather than actual problems or concerns. However, due to a salient aspect of cross-cultural interactions, empirical research on cross-cultural supervisory relationship might be challenging. Social influence model can be an effective way to understand the supervision process in cross-cultural dyads.

Social Influence

The term social influence describes the phenomenon of individuals' behaviors being affected by behaviors of other individuals. From the social influence perspective, change in human behavior occurs as a result of how individuals perceive themselves in relationship to other individuals who influence them (Asch, 1951; Milgram, 1983). Social psychologists (e.g., Dijksterhuis, 2001; Forgas & Williams, 2001) have claimed that social influence shapes not only our interpersonal behaviors but also our social cognitions, including our "thoughts, motivation, and feelings of social action" (Forgas & Williams, 2001, p. 6).

Strong's Social Influence Model

Strong (1968) conceptualized the *counseling* process as an *influence* process and proposed a two-phase model of counseling. In Strong's model, counselors need to "establish a base for influence" (Heppner & Claiborn, 1989, p. 367) in order to cause changes in clients' behaviors and attitudes. In the first phase, counselors try to establish themselves as expert, attractive, and trustworthy resources for their clients. In the second phase, counselors use their established resources, such as expertness, attractiveness, and trustworthiness, to influence clients to make appropriate behavioral or attitudinal changes (Heppner & Claiborn, 1989). Based on Strong's model, earlier researchers (e.g., Harmon, 1984) were interested in examining predictors of counselors' social influence rather than which of three variables counselors actually possessed. Thus, earlier studies were focused on what incidents predicted perceptions of counselors' expertness, attractiveness, and trustworthiness (Corrigan et al., 1980; Heppner & Dixon, 1981).

First, counselors' professional training, specialized knowledge, and high-status indications (e.g., reputation, diploma) affected clients' perceptions of counselors' *expertness* (Angle & Goodyear, 1984; McCarthy, 1982). Second, counselors' non-verbal (e.g., eye contact) and verbal (e.g., self-disclosure) responses were positively associated with clients' perceptions of counselors' *attractiveness* (Hackman & Claiborn, 1982; Strohmer & Biggs, 1983). Third, counselors' verbal and nonverbal cues related to confidentiality were found to be positively related to perceived counselor's *trustworthiness* (Merluzzi & Brischetto, 1983). In addition, counselors' source of expertness (e.g., professional training, reputation, or doctoral degree) was positively related to perceived counselor attractiveness (McCarthy) and trustworthiness (McKee & Smouse, 1983).

In terms of personal characteristics, researchers reported mixed results in clients' ratings of counselors' attractiveness. For instance, counselors' sexual orientation (Atkison & Alpert, 1981), ethnicity (Green, Cunningham, & Yanico, 1986), and physical attractiveness (Green et al., 1986; Paradise et al, 1980) were positively related to clients' perceptions of counselors' attractiveness while counselor's gender (Angle & Goodyear, 1984), physical disability (Strohmer & Biggs, 1983), age (Schneider & Hayslip, 1986), and weight (McKee & Smouse, 1983) did not affect perceived counselors' attractiveness.

In sum, the research on Strong's model has provided better knowledge in understanding what affects clients' perceptions of counselors' expertness, attractiveness, and trustworthiness. It was noted that counselors' general characteristics (e.g., gender, professional degree) may be less influential than their particular behavioral cues (e.g.,

verbal responses, self-disclosure statement) in affecting clients' perceptions of three social influence variables. However, these studies may have weakness in areas such as methodology (e.g., analogue study) and measurement of the study.

First, since a majority of early research on Strong's (1968) first stage (i.e., the first phase of influence process in counseling) depended on analogue studies (e.g., investigation of simulated counseling interactions using video or audio tapes), the results may be different from real-life counseling situation. For instance, counselor's status (e.g., doctorate) was found to affect clients' perception of counselors' expertness in analogue studies, while two field studies (e.g., investigation of interviews with volunteer clients after actual counseling sessions) found no difference among three experience levels of counselors regarding clients' perceptions of counselor expertness (Heppner & Heesacker, 1982). Second, the effect of counselors' self-perception of three social influence variables has rarely been investigated and almost has been excluded in the research on Strong's model.

Social Influence in Clinical Supervision

Given the relevance of social influence to the counseling relationship, social influence theory also has been applied to the supervision relationship. Clinical supervision also is viewed as a process of social influence in which supervisors affect the supervisees' behaviors and attitudes by modeling, providing feedback, and evaluation (Bernard & Goodyear, 2004).

Heppner and Handley (1981) explored interpersonal (social) influence in clinical supervision using a sample of 33 master's level counseling practicum students and 20

advanced-level doctoral student supervisors. They examined the relationship between supervisees' perceptions of supervisors' expertness, attractiveness, and trustworthiness and (a) supervisors' and supervisees' reported changes in supervisees' professional and personal behaviors and attitudes (e.g., changes as a counselor, a person, and a young professional) across one semester; and (b) both supervisors' and supervisees' perceptions of the supervisory relationship. Supervisors' social influence variables were measured by the Supervisor Rating Form, perceived supervisees' changes were measured by two parallel forms of the Supervision Questionnaire (SQ; Heppner & Handley), and perceived supervisory relationship was measured by two parallel forms of the Barrett-Lennard Relationship Inventory (BLRI; Barrett-Lennard, 1962).

Results suggested that most supervisors were perceived as expert, attractive, and trustworthy by their supervisees, but perceived supervisors' impact on supervisees' changes were viewed as minimal or slight. The results suggested, then, that supervisees' perceptions of expertness, attractiveness, and trustworthiness are necessary but not sufficient in the interpersonal influence process of clinical supervision. Although the findings of this study do not seem to support the influence process of Strong's (1968) model, there was a significant positive correlation between supervisors' self-perceptions of their therapeutic responses (i.e., regard, congruence, and empathy) and supervisees and supervisors' perceptions of their impact on supervisees. The authors noted, however, that further research was needed about the relationship between supervisors' self-perceptions and their ratings of perceived impact on supervisees. It also might be said that future researchers need to examine the relationship between supervisors' perceptions of their

expertness, attractiveness, and trustworthiness and other supervisor variables, such as counselor supervisor self-efficacy.

Friedlander and Synder (1983) tested a prediction model, based in Stoltenberg's (1981) developmental theory and social influence theory, to identify the contribution of supervisees' experience level and individual differences in predicting supervisees' expectations for the supervision process. Using a sample of 82 counselor-trainees at different levels (i.e., 29 beginning practicum, 31 advanced-practicum, and 22 intern students), they tested supervisee variables (i.e., self-efficacy, outcome expectancies) as predictors of supervisees' expectations for the supervision process reflected in both supervisors' attributes (i.e., expertness, attractiveness, trustworthiness) and supervisor roles (i.e., evaluative, support). Supervisees' perceptions of their supervisors' expertness, attractiveness, and trustworthiness were measured by the Supervisor Rating Form.

Friedlander and Synder's (1983) results indicated that supervisees' levels of self-efficacy and outcome expectations (i.e., professional development, personal development, ongoing behavior, and client's progress) significantly predicted their expectations for supervision. For example, supervisees with higher expectations of supervision to affect their clients and themselves expected more from their supervisors. More self-efficacious supervisees indicated higher expectations for supervisors' expertness and the evaluative role. In general, supervisees expected that attractive, trustworthy, and evaluative supervisors would impact their personal development, while they expected the supportive supervisory relationship would impact actual counseling behaviors. Regardless of

experience levels, supervisees expected their supervisors to be more trustworthy than expert, more expert than attractive, and more evaluative than supportive.

Friedlander and Synder' (1983) study provided a developmental base which had been lacking in earlier studies of supervisees' expectations and perception of supervision, but it had limitations. They did not consider supervisors' developmental variables (e.g., supervisors' experience level and supervisor self-efficacy) which might affect supervisees' expectations for supervisors' social influence attributes and supervisors' roles.

Heppner and Roehlke (1984) examined differences in the interpersonal influence process between supervisors and supervisees across three supervisee training levels (i.e., 25 beginning practicum students, 19 advanced practicum students, and 12 doctoral interns) during a 16-week semester. Supervisory dyads were arranged as follows: a) beginning practicum students were supervised by advanced doctoral students who were interns in the University Counseling Center, and b) advanced practicum and doctoral intern students were supervised by licensed psychologists on the counseling center training staff. Heppner and Roehlke focused on the relationship between supervisees' characteristics (i.e., expectations of supervision, locus of control); their initial perceptions of supervisors' expertness, attractiveness, and trustworthiness; and supervisors' impact on supervisees across supervisee training levels. Supervisors' expertness, attractiveness, and trustworthiness were measured by the Counselor Rating Form (CRF; Barak & LaCrosse, 1975), which was renamed the Supervisor Rating Form.

Results indicated no relationship between supervisees' characteristics (e.g., supervision expectation) and their initial perceptions of supervisors' expertness, attractiveness, and trustworthiness. However, it was noted that supervisees' characteristics (e.g., locus of control) and their perceptions of supervisors' social influence variables were significantly related based on supervisees' levels. For example, supervisees' perceptions of supervisors' expertness, attractiveness, and trustworthiness and their ratings of supervisory impact were significantly correlated only for beginning and advanced practicum students. Thus, the authors suggested that supervisees' perceptions of supervisors' social influence variables may interact with other variables as supervisees become more professionally developed.

Allen, Szollos, and Williams (1986) conducted a study of 142 advanced graduate students in APA - accredited programs in clinical and counseling psychology to investigate students' perceived best and worst supervisory experiences and their satisfaction. Participants were asked for information about their satisfaction with their clinical and academic training, supervision contextual issues (e.g., duration of supervision, supervision format – individual v.s. group), supervisors' personal characteristics (e.g., expertness, attractiveness, trustworthiness), and specific supervisory interactional aspects (e.g., scheduling for supervision, providing demonstration in supervision, communicating supervision expectations, and tolerance of value differences between supervisors and supervisees). The Counselor Rating Form (Corrigan & Schmidt, 1983) was used to measure supervisors' attributes (i.e., expertness, attractiveness, and trustworthiness).

Results indicated that supervisors' perceived expertness, attractiveness, and trustworthiness, the length of supervision, and an emphasis on personal growth issues in supervision were the best discriminators of perceptions of high quality of supervision. It also was noted that supervisees' best and worst supervision experiences were differentiated more strongly by supervisors' perceived expertness and trustworthiness than attractiveness.

Carey, Williams, and Wells (1988) examined the relationship between supervisors' expertness, attractiveness, and trustworthiness and supervision performance measures to test the applicability of Strong's (1968) model to training supervision. Using a sample of 17 supervisors (i.e., 7 counselor educator faculty members, 10 advanced doctoral students registered for a practicum in supervision) and 31 master's level supervisees (i.e., beginning practicum students), the authors obtained information about each one's perceived characteristics (i.e., expertness, attractiveness, and trustworthiness) and abilities (e.g., professional attitude, counseling behavior) for the 6 week period. The Supervisor Rating Form (SRF; Heppner & Handley, 1981) was used to assess supervisees' perceptions of supervisors' expertness, attractiveness, and trustworthiness. The Counselor Education Rating Scale (CERS; Myrick & Kelly, 1971) was used to measure supervisees' performance based on supervisors' ratings.

Carey et al. (1988) reported significant relationships between supervisors' ratings of supervisee performance and supervisees' ratings of supervisor expertness, attractiveness, and trustworthiness, supporting earlier research (e.g., Dodenhoff, 1981). Results also extended previous studies (Friedlander & Synder, 1983; Heppner & Handley,

1981), indicating supervisors' trustworthiness was most strongly related to all subscales of supervisee performance. Carey et al. suggested that supervisors who created a more trustworthy relationship were better able to influence supervisees in developing their professional abilities. They also speculated that supervisors' trustworthiness could be important, particularly at the earlier stage of supervisee development in helping ease their anxiety and promoting their risk-taking behaviors in their practicum experiences.

Young and Borders (1998) conducted an analogue study with a sample of 30 master's level students in their first year of a counseling program to examine the impact of supervisors' use of metaphor on supervisees' clinical hypothesis formation as well as supervisees' perceptions of supervisors' expertness, attractiveness, and trustworthiness. Two 9-minute segments of supervision sessions were generated to be utilized as the experimental treatments: a) a segment of supervision in which the supervisor used a narrative analogy metaphor to interpret the client's clinical issues, and b) a segment of supervision in which the supervisor used literal communications to clarify the client's clinical issues. After watching one of the two videotaped supervision sessions, participants completed the instrument packet. Supervisees' perceptions of supervisors' social influence characteristics were measured by the Supervisor Rating Form – Short (SRF-S; Schiavone & Jessell, 1988).

Results indicated that supervisees' single exposure to a supervisor's metaphor had no significant impact on supervisees' abilities to generate a clinical hypothesis and on supervisees' perceptions of supervisors' expertness, attractiveness, and trustworthiness as well. The authors noted, however, that supervisors' use of narrative analogy metaphor

tended to be related to higher ratings of expertness, and suggested significant differences between treatment groups might be found if a larger sample had been used.

Welsh (1998) investigated the relationship between predictor variables of perceived supervisors' social influence characteristics, relationship factors, and supervisees' counseling conduct and the criterion variable, supervisee self-efficacy. Using a sample of 39 master's level counseling students enrolled in a practicum or internship course, Welsh assessed participants' perceptions of supervisors' expertness, attractiveness, and trustworthiness, supervisee involvement or responsibility, supervisees' perceptions of the discrepant message, and supervisees' satisfaction with the communication exchange. Participants were provided weekly individual supervision by university-based, advanced counseling doctoral student supervisors. Results of this study indicated that only supervisees' responsibility significantly predicted supervisees' self-efficacy. Thus, this study provided limited support for the interpersonal influence process within the context of clinical supervision.

Culbreth and Borders (1999) examined differences in supervisees' perceptions of the supervisory relationship (e.g., perceptions of supervisors' expertness, attractiveness, and trustworthiness) regarding supervisee and supervisor substance abuse recovery status, and match or mismatch of supervisee and supervisor recovery status. The Supervisor Rating Form – Short (SRF-S; Schiavone & Jessell, 1988) was used to assess supervisees' perceptions of supervisors' social influence characteristics. Supervisees' satisfaction with supervision, perceived supervisory style, supervisory working alliance, and core conditions for behavioral change in supervision also were measured as other supervisory

relationship variables. Participants were 360 substance abuse counselors (i.e., 235 non-recovering counselors, 123 recovering counselors, 2 unknown) who worked in a southeastern state's public mental health system. Based on participants' reports, their supervisors had graduate level training (i.e., 203 master's level, 34 doctoral level) and most were in non-recovering status (i.e., $n = 251$, 71%).

Results of this study demonstrated that there were no main effects for supervisee recovery status or supervisor recovery status on satisfaction with supervision questions and all of the supervisory relationship measures. In general, both groups of substance abuse counselors (supervisees) seemed to be satisfied with their supervision. Their ratings, indicated, however, that supervisors' trustworthiness was slightly more important in their satisfaction with supervision than expertness and attractiveness. In this study, the concept of recovery status as a "professional credential" (Powell, 1993) was not supported. Non-recovering supervisees did not rate supervisors' expertness low due to their recovery status. The authors suggested that, for non-recovering supervisees, supervisors' recovery status may be a less significant credential in working in the substance abuse field than for the recovering community.

Schulz, Osokie, Fried, Nelson, and Bardos (2002) examined the supervisory relationship between rehabilitation counselors and their supervisors for the purpose of a) assessing the current practice of clinical supervision and b) validating Holloway's systems approach to supervision (SAS; Holloway, 1995) within the context of a post-educational setting. Using a sample of 111 vocational rehabilitation counselors, the authors investigated the relationships among supervisees' perceptions of the supervisory

relationship and the supervisory working alliance, the social influence process, and the existence of a supervisory contact. The Rahim Leader Power Inventory (RLPI; Rahim, 1988) was used to measure perceived supervisors' social influence power base (i.e., reward, coercive, legitimate, referent, and expert power).

Results of this study (Schulz et al., 2002) indicated that the more supervisors utilized their expertness and attractiveness (referent power) in supervision, the stronger the supervisory working alliance was perceived by supervisees. It was noted that the amount of time spent in supervision each week was significantly related to supervisors' perceived expertness and attractiveness. For the impact of supervisors' reward and legitimate (i.e., trustworthiness) power, the authors (Schulz et al.) suggested that supervisees seemed to be confused due to the nature of the supervisees' state employment contract.

In sum, to date, most of the studies on social influence in the supervision process have included only supervisees' perspectives, and involved primary White and U.S.-born participants. Further research is needed to test supervisors' perspectives with non-White or international born participants working in the U.S. As supervisors expand expertise, their self-efficacy grows (Stevens, Goodyear, & Robertson, 1997). Thus, supervisors' social influence variables, such as expertness, supervisors' self-efficacy can play a significant role in understanding supervisors' self-perceptions of their credibility. In the next section, self-efficacy theory, counseling self-efficacy, and counselor supervisor self-efficacy are summarized.

Self-Efficacy

Self-efficacy refers to individuals' judgments of their capabilities to manage and accomplish required tasks to attain prospective performances (Bandura, 1986). Self-efficacy activates through a circular process, in which individuals' personal (i.e., cognitive and affective process), behavioral, and environmental factors influence each other. Bandura (1995) suggested four primary sources affect the development of self-efficacy: "mastery experience," "vicarious learning," "social persuasion," and "physiological and emotional states" (Bandura, 1995, pp. 3-4). He noted that mastery experiences, such as successful achievements, play the most significant role in enhancing self-efficacy beliefs. Since efficacy beliefs control people's thoughts, emotions, and motivation, self-efficacy theory can be a theoretical framework to understand the developmental characteristics of international supervisors in clinical supervision.

Counseling Self-Efficacy

Counseling self-efficacy has been defined as a "counselor's beliefs or judgments about her or his capabilities to effectively counsel a client in the near future" (Larson & Daniels, 1998, p. 180). The majority of research on counseling self-efficacy can be categorized into four areas: (a) counseling training (e.g., taking counseling and supervision courses), (b) counseling experiences (e.g., completing counseling internship), (c) feedback on counseling sessions (e.g., supervisor' positive or negative feedback), and (d) emotional status in conducting counseling (e.g., novice counselor anxiety). Although counseling self-efficacy also has been applied to the supervision context, most studies have focused only on supervisees' counseling self-efficacy. Since supervisors have

potential impact on their supervisees' development (Lambert & Ogles, 1997), supervisors' self-efficacy may influence counseling self-efficacy of their supervisees. However, careful attention is needed to differentiate supervisors' self-efficacy from counseling self-efficacy, considering supervisors' complex functions compared to those of counselors' (Steward, 1998).

Supervisor Self-Efficacy

Research on supervisor self-efficacy is at a primitive stage of development. Very few studies have been focused on self-efficacy of supervisors and no reports of international supervisors' self-efficacy in the supervision literature were located.

Stevens, Goodyear, and Robertson (1997) conducted an analogue study to investigate the influence of supervisors' experiences and training on their supervisory attitudes, supervisory emphasis, and supervisor self-efficacy. Participants were 60 mental health professionals with different amounts of supervisory experiences, ranging from no experience to over 10 years of experience working as supervisors. Based on supervision training (i.e., either supervision course or workshop), participants were divided into four groups: no formal training, a single formal training, two formal trainings, and three formal trainings received. A majority of the participants held a Ph.D. (61.7%); the rest held either a master's (36.7%) or bachelor's (1.7%) degree. Participants' ethnic backgrounds were Caucasian (76.6%), African-American (11.7%), Asian (6.7%), and Hispanic (5.0%). After watching a videotaped counseling session, participants were asked to complete the Supervisory Emphasis Report Form-Revised (SERF-R; Lanning & Freeman, 1993), list their thoughts about conducting supervision with the counselor on

the video, and complete a self-efficacy measure developed by the authors. The self-efficacy measure consisted of a single item: “At my current level of supervisory skills and from what I have observed, I feel capable of supervising this counselor” (p. 80, Stevens et al.).

Results revealed a significant difference in supervisor’s self-efficacy between two groups: supervisors who had not completed any formal supervision training and supervisors who had completed three supervision trainings. The group with the three supervision trainings reported higher self-efficacy scores than the group with no supervision training. The group of supervisors with two formal supervision trainings was not significantly different from either of the other two groups. Regarding years of providing supervision, the group of supervisors with more than five years of supervision experience reported clearly higher levels of supervisor self-efficacy than those who had conducted supervision for 0-2 years of supervision experience.

These results suggested that supervisor self-efficacy levels are positively associated with the amount of formal supervision training and years of supervisory experience. However, further study is needed due to several limitations. First, this study developed a measure of a theoretical construct, supervisor self-efficacy, without a multidimensional approach. Barnes (under review) emphasized the importance of a systematic approach in developing a reliable and valid measure of supervisor self-efficacy. A one-item measure is limited in assessing supervisor’s beliefs in the complexity of supervision skills and knowledge. Second, supervisors’ cultural differences and similarities to their supervisees, which may affect their levels of self-efficacy, were

not considered. Since minority supervisors may feel powerless due to their perceived differences (Priest, 1994), their minority status might influence their self-efficacy beliefs.

Haley (2001) examined the influence of supervision training on supervisor self-efficacy among 145 clinical and counseling psychology doctoral students who were new to the supervisory role. The students were in internships at APA-accredited university counseling centers. Participants were required to supervise at least one counselor-in-training during their internship. The range of their supervision training included the follow: 33.8% no supervision course, 11.7% didactic supervision course only, and 54.5% didactic-practicum supervision course. The sample included diverse ethnic backgrounds: 75.2% European-American, 9% Asian-American, 6.2% African-American, 1.4 % Hispanics/Latino(a), 1.4% Multiracial, 0.7% American-Indian, and 6.2 % Others (i.e., “Asian International, International, Turkey, Arab-American, Jewish, and Caucasian/Hispanic”). Supervisor self-efficacy was measured by the Supervision Self-efficacy Questionnaire (SSQ; Haley, 2001), which was adapted from the Supervisory Focus and Style Questionnaire (SFSQ; Yager, Wilson, Brewer, & Kinnetz, 1989). The SFSQ was designed to evaluate the various styles (or roles) and focal points that a supervisor can integrate during supervision, based on the Discrimination Model (Bernard, 1979).

There were no significant differences reported in overall supervisor self-efficacy (as indicated by total scores on the SSQ) among the three supervisor groups (e.g., no course, didactic only course, and didactic-practicum course). However, doctoral interns who had completed a combined didactic-practicum supervision course reported

significantly higher levels of self-efficacy in addressing conceptualization issues with their supervisees when compared to those who had not complete any supervision course. Second, doctoral interns from counseling psychology programs reported significantly higher levels of supervisor self-efficacy compared to interns from clinical psychology programs. Third, doctoral interns with experience in providing supervision revealed greater supervisor self-efficacy in the teacher role when compared to doctoral interns without experience in providing supervision. In addition, several supervision-related variables (e.g., doctoral program, supervision experience, supervised supervision experience, and types of supervision training) yielded significantly different levels of supervisor self-efficacy in each focal point of supervision and each supervisor role, except in the counselor role. High levels of counseling self-efficacy were found among all doctoral student interns.

Results supported the idea that supervision training may influence positively the levels of supervisor self-efficacy for doctoral student interns who are new to the supervisor role. However, further research is needed due to some limitations. First, Barnes (under review) noted that the Supervision Self-efficacy Questionnaire (SSQ) did not include Bandura's (1997) suggestions for self-efficacy scale construction, suggesting weak psychometric support for the SSQ in assessing supervisor self-efficacy. Second, some of subscales of the SSQ showed significant differences between the pilot sample (i.e., doctoral students enrolled in counseling psychology course) and main sample (i.e., doctoral students who were at the beginning stage of their internship). Thus, the SSQ may be capturing inconsistently the construct of supervisor self-efficacy. It may be that this

measure ignored supervisors' developmental levels, considering only supervisors' roles and supervision focus.

Barnes (2002) developed and reported initial validation of the Counselor Supervisor Self-Efficacy Scale (CSSES) using a sequential and rational approach grounded in Bandura's theory of self-efficacy (1997). This study was conducted in three phases, including expert evaluations, pilot study, and main study. Six supervision experts reviewed the item pool to determine the construct validity of CSSES. Afterwards, 69 out of 87 items remained and 6 items were added based on reviewers' feedback. The pilot study was conducted with 20 counselor supervisors using the pilot version of the Counselor Supervisor Self-Efficacy Scale. Ten items were dropped based on both the qualitative and quantitative data, several items were rewarded, and one item was added.

For the main study, a total 287 supervisors were asked to complete the Psychotherapy Supervisor Development Scale (PSDS, Watkins, Schneider, Haynes, & Nieberding, 1995) and a demographic form in addition to the CSSES. The demographic data in this study represented the gender and ethnicity distributions within the Association for Counselor Education and Supervision (ACES, 2001): 58% female (42% male), European American (83%), African American (5%), Asian American (4%), Latino/a American (2%), Native American (2%), and mixed race (1%). The majority of the participants (47%) reported their profession as a professor in either counselor education program or counseling psychology. Participants' degree fields included counselor education (68%), counseling psychology (16%), and marriage and family therapy (5%).

Results supported the psychometric properties of the CSSES, including good internal consistency, temporal stability across 4-6 weeks, and an oblique six factors. The study (Barnes, 2002) provided validity support for the CSSES, revealing significant positive correlations of the CSSES scores among supervisors with various levels of development and experience. Significant differences were found in the CSSES scores among supervisors' different levels of certification status, education, and profession. Additional validity evidence was reported through significant positive correlations between the CSSES scores and a measure of self-esteem (Barnes, 2008).

Barnes (2008) noted that the CSSES maybe most useful to supervisors when combined with their social cognitive variables, such as competence, perceptions of outcome expectancy, and anxiety. Thus, further research on the relationship between supervisor self-efficacy and supervisors' perceptions of their credibility in influencing their supervisees would be helpful.

Since the acculturation process changes individuals' thoughts, emotions, and behaviors (Berry, 1998), international supervisors' acculturation levels can be used in understanding their perceptions in their interpersonal relationships. In the next section, international students' acculturation and its possible relationship with other variables in cross-cultural supervisory relationships are reviewed.

Acculturation

Acculturation is a collective term which involves the meeting of cultures and the resulting changes (Sam & Berry, 2006). Acculturation theory developed in the field of anthropology (e.g., Hallowell, 1955) earlier, and it has been applied in fields of

psychology and counseling more recently (e.g., Berry, Kim, Minde, & Mock, 1987).

Anthropologists defined *acculturation* as a process of cultural change at a group level, whereas counseling and psychologists focused on a process that occurs at an individual level. Therefore, in this study, Berry's (1997) definition - individuals' behavioral and psychological changes as a result of their continuous contact with a secondary culture – was used.

Acculturation Theory

Theoretically, *acculturation* has been viewed as unidirectional (e.g., Garcia & Lega, 1979; Mendoza, 1984) or bidirectional (e.g., Berry, 1983; Sodowsky, 1991). A unidirectional model assesses the acculturation process in only one direction – changes to the host culture and giving up home culture, whereas a bidirectional model considers both directions – assimilation to the new culture and preservation of home culture for assessing individuals' acculturation process. In the present study, a bidirectional approach was selected to define participants' acculturation since it provides a better understanding of the interactive process of acculturation among immigrants (Wosinska, Cialdini, Barrett, & Reykowski, 2001). It is important to consider both directions between the host and home cultures in understanding acculturation status of international students (Mori, Inman, & Caskie, 2009).

Berry (1997) introduced a four-type model of acculturation attitudes based on individual negotiation between maintaining one's home culture and adapting/participating in the host culture (e.g., U.S. culture, in the case of international students). Acculturation attitudes are thought to impact an individual's acculturation

strategies and adjustment process: (a) assimilation, (b) separation, (c) biculturalism, and (d) marginalization/rejection. It has been known that having integration/bicultural acculturation attitudes is the most adaptive way for minority group members to be successful while staying in the United States (Szapocznik, Kurtines, & Fernandez, 1981). During the process of negotiating between maintenance and adaptation, an individual experiences various types of challenge which would impact on the individual psychological area. This is called “acculturative stress,” such as identify confusion, homesickness, sense of insecurity, and value conflicts (Johnson & Sandhu, 2007).

Tran (1993) found that stress due to acculturation was associated with lower levels of personal self-efficacy. In later studies, Nilsson and colleagues (1999, Nilsson & Anderson, 2004; Nilsson & Dodds, 2006) found that more acculturated international students reported less counseling self-efficacy. Nilsson (2007) also reported a strong negative relationship between academic stress and self-efficacy among international students. These findings seem applicable to the present study in examining the role of acculturation on the clinical supervisor self-efficacy of international supervisors.

Acculturation and International Students in Clinical Supervision

Since acculturation theory provides a multifaceted view of the human adjustment process to a new culture (Nilsson, 1999), it can be useful for understanding the process and outcomes of international students’ cross-cultural adjustment (Berry, 1998; Roysircar, 2004). However, international students’ acculturation issues are different from ones of immigrants, refugees, and indigenous groups, in which international students are required to make a rapid adjust to the U.S. culture and academic system (Berry, 1998). Although

most international students experience visible and invisible demands to accommodate to new cultural and societal norms in the U.S. (Sandhu & Asrabadi, 1994), their responses to these demands are varied (Lazarus, 1997). These requests can be opportunities as well as challenges, depending on the degree of international students' willingness and capability in shifting their cognitions, values, and behaviors (Johnson & Sandhu, 2007) to the U.S. culture.

In the counseling literature, both quantitative and qualitative research on acculturation among international students has been conducted. However, only a few empirical studies have been applied in supervision contexts (i.e., Nilsson, 1999; Nilsson & Anderson, 2004; Nilsson & Dodds, 2006; Nilsson, 2007). In this subsection, since Nilsson's (1999) study is a comparison with U.S. students, only two studies will be reviewed.

Nilsson and Anderson (2004) investigated the role of acculturation, counselor self-efficacy, role ambiguity, the working alliance, and cultural discussion in supervision to reveal the training needs of international counseling students. The sample included 42 international student supervisees who were enrolled in APA-accredited psychology doctoral programs, representing 20 countries and 6 continents: 40% Asia, 21% Europe, 19% South America, 14% North America, 2% Africa, and 2% Australia. Participants' time of stay in the U.S. ranged from about 3 years to about 8 years. The American-International Relations Scale (AIRS; Sodowsky & Plake, 1991, 1992) was used to measure participants' acculturation levels. The Counseling Self-Estimate Inventory (COSE; Larson et al., 1992) was used to measure participants' perceptions of their self-

efficacy in counseling situations. The Supervisory Working Alliance Inventory –Trainee Form (SWAI-Trainee Form; Efstation et al., 1990) was used to assess participants' perceptions of their supervisory relationship.

Results revealed some notable correlations among acculturation, working alliance, and counselor self-efficacy. First, supervisees' acculturation level was more associated with the rapport between supervisors and supervisees than supervision focus on the clients. Second, supervisees' lower preference for using English (i.e., AIRS- Language Use) was associated with a weaker supervisory working alliance (Supervisory Working Alliance-Rapport), more role ambiguity, and more discussion of cultural issues in supervision. Third, supervisees' feeling more rejected by people in the U.S. (AIRS- Perceived Prejudice) was associated with a weaker supervisory working alliance (Supervisory Working Alliance-Rapport), more role ambiguity, and more discussion of cultural issues in supervision. Fourth, supervisees' acculturation levels predicted their counseling self-efficacy (i.e., total score of AIRS). It could be that supervisees' acceptance of the U.S. culture (AIRS-Acculturation) was correlated with greater perceived ability to use counseling skills, more cultural competence, and awareness of values. In addition, supervisees' feeling more accepted by people in the U.S. (AIRS- Perceived Prejudice) was correlated with greater perceived ability to manage the counseling process.

These findings offered initial empirical data regarding the role of acculturation in establishing a positive supervisory relationship with international supervisees. However, information about international students as supervisors was not included. Thus, further

research is needed to examine the relationship between the supervisory working alliance and supervisors' variables, such as ethnic background.

Nilsson and Dodds (2006) examined the relationship between acculturation and responses on the International Student Supervision Scale (ISSS) reporting the pilot stage (i.e., item development, exploratory factor analysis) in the development of ISSS. The ISSS was designed to measure unique supervisory issues of international students. Participants consisted of 115 international students who were or recently have been in clinical supervision. Participants were enrolled either in APA-accredited counseling programs (79%) or CACREP-accredited counseling programs (21%) at the time of the study. The sample represented 39 countries and six geographical regions: Asia/Middle East, Europe, Central/South America/Caribbean, North America, Africa, and Australia. Participants reported the race/ethnicity of their supervisors: White (85%), Asian/Pacific (7%), Hispanic/Latino (3%), Black/African American (2%), and others (3%). The American-International Relation Scale (AIRS; Sodowsky & Plake, 1991) was used to measure participants' acculturation level.

Nilsson & Dodds' results indicated that supervisees' acculturation level was associated with supervisees' needs for discussion of cultural issues. For example, less acculturated supervisees reported more discussion of cultural issues. In addition, supervisees from Africa, Asia, and South/Central America indicated more cultural discussion than supervisees from Europe, Canada, and Australia. It was suggested that supervisees from the first group of regions (e.g., Africa) experience more barriers compared with those who from latter regions (e.g., Europe), and the former tend to use

cultural discussion in managing these adjustment difficulties. The authors noted that less acculturated supervisees reported more needs for cultural discussion, felt more culturally competent, and were more willing to discuss cultural issues than their supervisors.

In sum, the current review revealed that studies of acculturation and international students in supervision contexts were limited only to international students as *supervisees*. Further empirical studies are needed including international students as *supervisors*. As international doctoral students are increasing in U.S. counseling programs (Ng, 2006a; Ng, 2006b), counselor educators also need to know supervision training needs and experiences of international doctoral students as *supervisors*. Supervisors' concerns, such as anxiety, may hinder the development of supervisor self-efficacy (Steward, 1998; Tran, 1993). In addition, there is a strong relationship between acculturation and self-efficacy in clinical supervision with international students as supervisees. Thus, it is important to examine the relationship between acculturation status and supervisor self-efficacy levels for understanding the training needs of international students as supervisors.

Summary

The preceding review of the literature revealed the importance of examining international supervisors' perceptions of their credibility in cross-cultural dyads of clinical supervision is clear. As previously reviewed, as international *doctoral* students in U.S. counseling programs increase, more information for understanding their professional development issues, such as the role of *supervisor*, is necessary. However, there is lack of research on minority supervisors in cross-cultural dyads of clinical supervision and only one study on international doctoral students' experiences as *supervisors* was located.

Since supervision can be viewed as the process of influence, social influence model has been used in understanding the process of supervision and examining supervisors' credibility. Thus, the social influence model and its variables can be used as an effective way to examine international supervisors' interpersonal influence in cross-cultural dyads of clinical supervision. Since both self-efficacy and acculturation influence individuals' cognitive and behavioral changes, these two variables also need to be considered in examining international supervisors' self-perceptions of their social influence.

The current study has been designed to fill these gaps in the literature by focusing on international supervisors' perceptions of their social influence variables, supervisor self-efficacy, and acculturation level when supervising U.S. - born supervisees. Specifically, supervisor self-efficacy was tested as a potential mediator of the relationship between acculturation and social influence variables.

CHAPTER III

METHODOLOGY

In this chapter, the design and methodology for the current study are presented, including descriptions of (a) research questions and hypotheses, (b) participants, (c) variables and instruments, (d) procedures, (e) data analysis, (f) pilot study, and (g) limitations.

Research Questions and Hypotheses

Research Question 1: Is there a strong linear correlation between the levels of international supervisors' self-efficacy and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

Hypothesis 1: There will be a strong positive linear correlation between the levels of international supervisors' self-efficacy and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision.

Research Question 2: Is there a strong linear correlation between international supervisors' levels of acculturation and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

Hypothesis 2: There will be a strong positive linear correlation between international supervisors' levels of acculturation and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

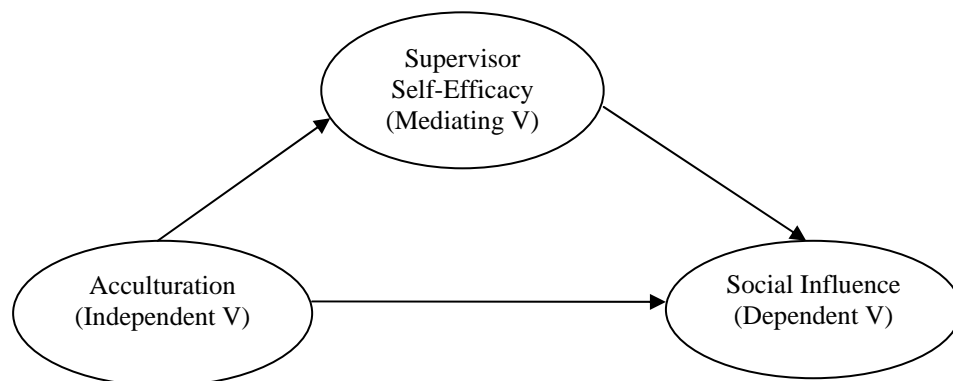
Research Question 3: Is there a strong linear correlation between international supervisors' perceptions of their self-efficacy and their acculturation levels in cross-cultural dyads of clinical supervision?

Hypothesis 3: There will be a strong positive linear correlation between international supervisors' perceptions of their self-efficacy and their acculturation levels in cross-cultural dyads of clinical supervision.

Research Question 4: Is the strong linear correlation between international supervisors' acculturation and their social influence variables mediated by their self-efficacy in cross-cultural dyads of clinical supervision?

Hypothesis 4: The strong linear correlation between international supervisors' acculturation and their social influence variables will be mediated by their self-efficacy in cross-cultural dyads of clinical supervision (See Figure 1).

Figure 1. Mediation Model



Research Question 5: To what extent do international supervisors' gender, their first language preference (i.e., English vs. non-English), and their perceived racial appearance (i.e., "Persons of Color" vs. White) predict their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

Hypothesis 5: Supervisors' gender, their first language preference (i.e., English vs. non-English), and their perceived racial appearance (i.e., "Persons of Color" vs. White) will not predict their perceptions of their expertness, attractiveness, and trustworthiness.

Participants

Participants were international doctoral students and international counselor educators who were not U.S. - born, and who had conducted at least one semester of clinical supervision with U.S. - born supervisees. Initially, participants were recruited only from CACREP-accredited counseling programs. However, due to a small sample size ($n = 28$, 76%), participants ($n = 9$, 24%) from counseling related programs (i.e., marriage and family therapy program, counseling psychology program) also were added to the target sample. In addition, international counselor educators were limited to those who are in their early years of post-doctoral positions (i.e., less than 3 years) in order to control time factors (e.g., supervision experiences, the length of time stay in the U.S.) which might affect their self-efficacy and acculturation level. However, participants who were not in their early years of the professional positions (i.e., more than 3 years) were also included for the main study to increase a sample size. The initial estimated number of participants was 50, based on the representation of international doctoral students in CACREP-accredited programs (Ng, 2006b).

Instrumentation

All participants completed the Supervisor Rating Form – Short version (SRF-S; Schiavone & Jessell, 1988), the Counselor Supervisor Self-Efficacy Scale (Barnes, 2002), the American-International Relations Scale (Sodowsky & Plake, 1991, 1992), and a demographic form.

Supervisor Rating Form - Short (SRF-S; Schiavone & Jessell, 1988) (See Appendix B)

The SRF-S was used to measure international supervisors' perceptions of their use of three social influence dimensions (i.e., expertness, attractiveness, and trustworthiness) with U.S.-born supervisees. The SRF-S is based on Strong's (1968) idea that primary communicators (e.g., supervisors) try to establish their credibility, such as expertness, attractiveness, and trustworthiness, so they may better influence the secondary communicator (e.g., supervisees) to make appropriate behavioral or attitudinal changes. Strong viewed the process of therapeutic change as the process of opinion change of clients influenced by counselors. Supervision also can be viewed as a process of social influence in which the supervisor affects the supervisee's behaviors and attitudes by modeling, providing feedback, and conducting evaluations (Bernard & Goodyear, 2004; Heppner & Handley, 1981). The SRF-S is an adaptation of the Counselor Rating Form –Short version (Corrigan & Schmidt, 1983).

The CRF-S is an adaptation of the Counselor Rating Form (CRF; Barak & LaCrosse, 1975), which was developed to assess the three social influence dimensions: expertness, attractiveness, and trustworthiness. The CRF consists of 36 adjectives, 12 of which describe each of the three social influence dimensions: expertness, attractiveness,

and trustworthiness (Strong, 1968). The CRF follows a 7-point bipolar response format, with the opposite descriptive adjective indicating the other side of the Likert scale (e.g., experienced/inexperienced). The CRF was modified into a short version by Corrigan and Schmidt (1983), reducing the 36 adjectives to 12, 4 adjectives per dimension. The CRF-S consists of a 7-point format ranged from the words “not very” to “very” in order to rate the degree present of positive adjectives.

Barak and LaCrosse (1975) asked 202 student volunteers in psychology class to use the CRF to rate the counseling behaviors of Rogers, Ellis, and Pearls after viewing the film *Three Approaches to Psychotherapy* (Shostrom, 1966). Barak and LaCrosse reported acceptable reliability, content validity, and empirical validation of the CRF through a factor analysis. Later, LaCrosse and Barak (1976) reported that split-half reliabilities for the original CRF were .87, .85, and .91 on expertness, attractiveness, and trustworthiness. The original reliability coefficients of the CRF-S reported with 554 participants ($n = 133$ for each of the three replication samples; $n = 155$ for the extension sample) were .90 for expertness, .91 for attractiveness, .87 for trustworthiness (Corrigan & Schmidt, 1983).

Zhang and Dixon (2001) used the CRF with 60 Asian international students to investigate clients' perceptions of the difference between culturally responsive and culturally neutral counselors. They reported high internal consistency coefficients for all three subscales of the CRF: .85 for expertness, .83 for attractiveness, and .89 for trustworthiness.

Feldman, Kluman, and McCrone (2005/2006) used the CRF-S with 20 undergraduate students at a special college for deaf students to examine clients' perceptions of their counseling experience. With 12 items, they computed 2 subscales: 5 professional skills (e.g., prepared, skillful, experienced, reliable, and expert) and 7 personal skills (e.g., friendly, warm, trustworthy, honest, likable, etc.). Feldman et al. (2005/2006) reported relatively high levels of internal consistency reliability for the CRF-S (i.e., .936 for professional scale, .937 for personal scale).

The SRF is a modified version of the CRF created by Heppner and Handley (1981). The word "counselor" was replaced with "supervisor" in the items, title, and instructions of the SRF. The SRF-S is an altered version of the CRF-S, including very slight changes by Schiavone and Jessell (1988). The only alteration was to change from "rate your counselor" to "rate your supervisor" in the instructions of the SRF-S. A 12-item Likert-scale of the SRF-S was used to rate U.S.-born supervisees' perceptions of U.S.-born supervisors on the three dimensions of social influence (Strong, 1968). Using the Spearman Brown formula, reliability coefficients of the SRF-S were reported as .90, .91, and .87 on expertness, attractiveness, and trustworthiness (Schiavone & Jessell, 1988).

In a more recent study, Mejeda (2002) used the SRF-S to investigate both U.S.-born and "international"-born (5% of the participants: Indians, African, and Afro-Caribbean) supervisees' perceptions of both U.S.-born and international-born (2% of the participants) supervisors' social influence in supervision. Mejeda reported that reliability coefficients of the SRF-S with the 78 counseling trainees were .86 for expertness, .86 for

attractiveness, and .85 for trustworthiness, and a strong level of reliability for the total score (.92). This study also provided some initial support for using the SRF-S with international supervisors.

Nilsson (2007) used the modified version of CRF-S (i.e., the word “counselor” was substituted with the word “supervisor”) with 73 international counseling supervisees to examine the relationships between academic variables (i.e., academic stress, course self-efficacy) and supervision variables (i.e., supervisees’ perceptions of supervisors’ expertness, attractiveness, and trustworthiness, supervisees’ perceptions of cultural discussion and cultural knowledge in supervision). Cronbach’s alphas were .94 for the total scale, .92 for attractiveness, .90 for expertness, and .92 for trustworthiness. No problems with the wording of the modified version of CRF-S were reported by the international student participants in this study.

For this study, based on the 7-reponse format (e.g., not very = 1, very = 7), the instructions are to “circle the number that best represents how you view yourself as a supervisor.” Examples of adjective items include “experienced” from the expertness subscale, “likable” from the attractiveness subscale, and “sincere” from the trustworthiness subscale. Subscale scores are computed by summing responses on the four items for each subscale, with possible scores ranging from 4 to 28. Higher scores indicate greater perceptions of expertness, attractiveness, and trustworthiness.

Counselor Supervisor Self-Efficacy Scale (CSSES; Barnes, 2002) (See Appendix B)

The CSSES was used to measure international supervisors’ beliefs about their capabilities to perform specific tasks during the supervision process. The CSSES has 39

Likert type items for which respondents can choose from 1 (not confident at all) to 10 (completely confident). The middle score 5 indicates “somewhat confident.” Barnes (2002) proposed 6 factors which can affect supervisor self-efficacy: 1) Theories and Techniques (14 items), 2) Group Supervision (5 items), 3) Supervisory Ethics (8 items), 4) Self in Supervision (5 items), 5) Multicultural Competence (3 items), and 6) Knowledge of Legal Issues (3 items). The measure is based in social cognitive theory (Bandura, 1986). The total score of the CSSES is computed by summing all item scores, with higher scores indicate a higher level of self-efficacy.

Reliability data for the CSSES suggests good internal consistency for the total score, with a high coefficient alpha (.97). The six subscale (factors) scores of the CSSES have moderately high alpha coefficients, ranging from .78 to .97. A test-retest study with 57 supervisors found good temporal stability across a four to 6 week period among experienced supervisors ($r = .82, p < .0001$) (Barnes, in process). Construct validity was supported through significant positive correlations of CSSES scores with supervisors’ levels of development and experience, and significant differences in CSSES scores by supervisors’ levels of education, training, and profession (Barnes).

Examples of subscale items include item 13: “Assist a supervisee to develop a strategy to address client resistance” for Theories and Techniques; item 35: “Facilitate case discussion during group supervision” for Group Supervision; item 2: “Articulate to a supervisee the ethical standards regarding client welfare” for Supervisory Ethics; item 11: “Solicit critical feedback on my work as a supervisor from either my peers or an evaluator” for Self in Supervision; item 6: “Assist a supervisee to include relevant

cultural variables in case conceptualization for Multicultural Competence; and item 3: “Present procedures for assessing and reporting an occurrence of child abuse” for Knowledge of Legal Issues (Barnes, 2002). In this study, the total score of CSSES was used to analyze collected data due to a relatively small sample.

American-International Relations Scale (AIRS; Sodowsky & Plake, 1991, 1992)

The ARIS was used to estimate international supervisors’ self-perceptions of their level of acculturation to the U.S. culture. Since the AIRS is restricted for general reading, including dissertations appendix by the author, the actual form was not added to this paper. The AIRS was designed to measure acculturation of international students, scholars, and other people newly arrived to the U.S. (Sodowsky & Plake, 1991). The AIRS is based on the theory that acculturation is a bi-directional process in individual’s attitudes and behaviors toward his or her native as well as the host culture (Berry, 1983; Levine & Padilla, 1980; Mendoza, 1984).

The AIRS consists of 34 items, including 8 multiple choice and 26 Likert-type items. The first 8 multiple choice items (i.e., items 1 through 8) use a 5-point scale which reflects a Likert-type format. For example, item number 8 reads as follows:

I believe myself to be an individual

- ___ 1. With many similarities with Americans
- ___ 2. With some similarities with Americans
- ___ 3. Equally similar to Americans and to people from my country
- ___ 4. With some similarities with people from my country
- ___ 5. With many similarities with people from my country

The 26 Likert-type items use a 6-point scale, ranging from 1 (“disagree strongly,” strong affiliation with Americans) to 6 (“agree strongly,” strong affiliation with one’s nationality group, suggesting rejection of the U.S. society or observance of traditionality). A middle score for both multiple choice format and Likert-type indicates acceptance of both worlds, without denial, suggesting integration or biculturalism (Sodowsky & Plake, 1992).

The AIRS consists of three subscales: (a) Perceived Prejudice (20 items), which assesses the perceived degree of the individual’s acceptance by Americans; (b) Acculturation (11 items), which assesses the individual’s degree of acceptance of U.S. cultural practices and social ties; and (c) Language Use (3 items), which assesses the individual’s preference for using English compared with his or her native language. The AIRS produces a total score and three subscale scores. Subscale scores are computed by summing individual item ratings on each of the three domains: 20 items for Perceived Prejudice, 11 items for Acculturation, and 3 items for Language Use. Total scores are obtained by summing the three subscale scores. Scores on each subscale range from 20-120 for Perceived Prejudice, from 11-61 for Acculturation, from 1-15 for Language Use. In present study, the range for biculturalism computed by adding a middle score for each item (i.e., total scores of the AIRS range from 102-128) was used and all scores on the AIRS were reversed to avoid confusion. Therefore, higher scores on the ARIS indicate higher levels of acculturation.

Sodowsky and Plake (1991) conducted a pilot study with 123 Asian Indian students, faculty, and staff at a major southwestern university. Cronbach alpha estimates

of internal consistency for the subscales ranged from .77 to .87. Spearman-Brown split half reliabilities for the subscales ranged from .75 to .82. The subscales of the AIRS showed promising internal consistency estimates of reliability as a newly developed scale. In addition, the intercorrelations for the subscales were low to moderate (i.e., .20, .52, and .36).

Later, Sodowsky and Plake (1991) examined psychometric properties of the AIRS with a sample of 606 participants (e.g., international students, faculty, and staff from Asia, Africa, Latin America, Europe, and Australia, return rate of 67%). Factor analysis of the 34 items yielded low factor loadings, ranging from .33 to .89. Internal consistency reliabilities were reported as adequate, with Cronbach's alphas of .89 for the full scale, .89 for Perceived Prejudice, .79 for Acculturation, and .82 for Language Use (Sodowsky & Plake, 1991). The subscale intercorrelations were reported as low, ranging from .28 to .44; the Perceived Prejudice subscale was correlated most highly with the Acculturation subscale ($r = .44$).

Mehta (1993) used a slightly revised version of the AIRS with 195 Asian Indian immigrants and reported internal consistency reliabilities of .87 for the full scale, .87 for Perceived Acceptance (Perceived Prejudice), .75 for Cultural Orientation (Acculturation), and .62 for Language Use. Intercorrelations of the three subscales were low to moderate, ranging from .43 to .13 (Mehta, 1998). Mehta reported that higher levels of Perceived Prejudice and lower levels of Acculturation predicated lower levels of mental health among Indian immigrants, providing some evidence of validity.

Stark-Wroblewski, Yanico, and Lupe (2005) used the Acculturation subscale of AIRS to investigate the relationship between Westernization and eating pathology among non-Western women (e.g., international students in the U.S.). Estimated internal consistency reliability was .80 for the Acculturation subscale, and its results demonstrated good international consistency for the sample of 106 female international students from Japan, Peoples Republic of China, Taiwan, and Hong Kong. The scores on Acculturation indicated a reasonable relationship between participants' acculturation levels and their length of time spent in the U.S.

Nilsson and Anderson (2004) investigated the relationships among counseling self-efficacy, role ambiguity, supervisory working alliance, and acculturation of 42 international students in APA-accredited programs. AIRS was used to measure levels of international students' acculturation to the U.S. majority culture. Nilsson and Anderson reported Cronbach's alphas of .88 for the full scale, .87 for Perceived Prejudice, .71 for Acculturation, and .92 for Language Use. For the validity of AIRS, Nilsson and Anderson reported the Acculturation subscale had a broader impact on students' counseling self-efficacy than did the other two subscales of AIRS, that lower levels of acculturation (e.g., accept U.S. culture less than one's native culture) were associated with lower levels of counseling self-efficacy, weak supervisory working alliances, more role difficulties (e.g., supervisee's uncertainty about supervisory expectation, expected performance, and evaluation criteria) in supervision, and more discussion of cultural issues in supervision.

The validity of the AIRS was tested by Sodowsky and Plake (1992) with the same sample used in their previous study (Sodowsky & Plake, 1991). Using a MANOVA, Sodowsky and Plake (1992) examined the differences in acculturation among international students, postdoctoral researchers, and permanent U.S. residents and naturalized citizens from different continents, such as Africa, European, Asian, and South America (*n* ranged from 483 to 491 for different analyses). Respondents from Africa, Asia, and South America were significantly less acculturated than were international people from Europe. Sodowsky and Plake also reported that acculturation was significantly associated with three sociocultural variables: nonpermanent (e.g., immigrants and naturalized citizens) vs. permanent (e.g., persons on student visas) residence status, years of residence in the U.S., and religion.

Nahla (2003) used the AIRS to investigate predictors of international students' willingness to seek counseling. A significant correlation was found between acculturation level and attitude toward counseling: individuals with higher acculturation toward the U.S. culture were more likely to seek counseling. Nahla's results supported the validity of the AIRS, suggesting that Euro-Western cultural values include an individual's willingness to seek counseling. Nahla also reported that international students' acculturation levels were significantly associated with their years of residence in the U.S.

Although some low factor loadings have been reported (i.e., ranged between .33 and .83), each subscale score of the AIRS (Sodowsky & Plake, 1991) will be used in this study for several reasons: a) the author recommended use of the subscale scores; b) all three subscales have obvious relevance to the social influence variables; and c) all three

subscales have been found to be related to international students' perceived counseling self-efficacy and supervisory working alliance (Nilsson & Anderson, 2004).

Demographic Form

The demographic form was created by the researcher for the present study. On the demographic form (See Appendix B), participants designated gender, age, country of origin and whether this is an English speaking country or non-English speaking country, racial appearance (e.g., "Person of Color" vs. White), years and types of supervision experience, amount and types of supervision training, and length of residence in the U.S.

Procedures

The researcher convened a convenience sample through a variety of means described below. Since the researcher anticipated the population would be relatively small, the snowball technique also was used. In addition to persons the researcher had met at multicultural network meetings at professional conferences held by the Southern Association for Counselor Education and Supervision, the Association for Counselor Education and Supervision, and the American Counseling Association, the researcher also contacted counselor educators by using the directory of CACREP-accredited counseling programs.

Participants were contacted through the department at target universities via an e-mail announcement (See Appendix A) after the researcher had contacted the CACREP-liaisons. The researcher also recruited participants via two listservs: Counselor Education and Supervision Network (CESNET), Association for Counselor Education and Supervision New Faculty Interest Network (ACES NFIN), and Association for

University and College Counseling Center Directors (AUCCCD). The study was explained briefly via an electronic announcement (See Appendix A) and was distributed to potential participants on the three listservs mentioned above. All participants interested in participating in this study were asked to provide a mailing address to the researcher. Also, participants were asked to forward the email to other international supervisors they know.

Once the researcher received mailing addresses for participants, the survey packet, including a copy of the informed consent form (See Appendix A), three instruments and a demographic form (See Appendix B), were delivered to the participants using a stamped envelope with the researcher's address. After reading and signing the consent form, all participants were asked to complete the three instruments and the demographic questionnaire in the following order: the Supervisor Rating Form – Short version (SRF-S; Schiavone & Jessell, 1988), the Counselor Supervisor Self-Efficacy Scale (Barnes, 2002), the American-International Relations Scale (Sodowsky & Plake, 1991, 1992), and the demographic form developed by the researcher. After completing all instruments in the above order, participants were asked to return the packet to the researcher using the stamped, addressed envelopes provided in the survey packet.

Data Analysis

Correlation Analysis

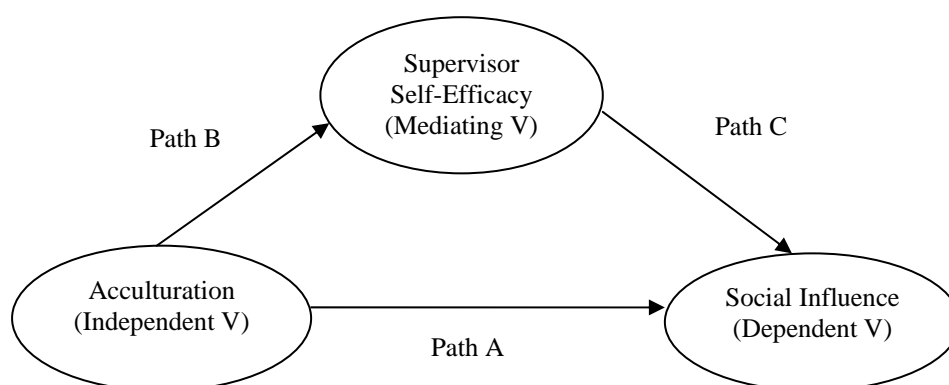
For the first, second, and third hypotheses (i.e., H1, H2, and H3), correlation analyses were performed using the Statistical Package for the Social Sciences for Windows (SPSS 17, Inc., 2009) to examine the relationships among international

supervisors' self-efficacy, their levels of acculturation, and their perceptions of their use of expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision. A correlation matrix was provided for each hypothesis.

Mediating Path Analysis

For the fourth hypothesis, a conceptualized mediation model (See Figure 1) was tested using simple correlation analyses and Sobel's formula (1982). A mediated relationship refers to a relationship when one variable mediates the relationship between two other variables (Howell, 2002). Baron and Kenny (1986) stated that all three paths of a relationship (i.e., path B: independent variable -> mediating variable, path C: mediating variable -> dependent variable, and path A: independent variable -> dependent variable) need to be individually significant to claim a mediating relationship (See Figure 2).

Figure 2 Three Paths of Mediating Relationship



Correlation analyses among independent (i.e., acculturation levels), mediating (i.e., supervisors' self-efficacy), and dependent variables (i.e., social influence variables) were performed. Analyses of the first three hypotheses (i.e., H1, H2, and H3) indicated if these correlations satisfy Baron and Kenny's (1986) basic prerequisites for a mediating relationship. A series of simple linear regression analyses were run to test if acculturation is a sole significant predictor of social influence variables and if acculturation is still a significant predictor when supervisor self-efficacy is added as another predictor. Another series of simple linear regression were performed to test if supervisors' self-efficacy is a significant predictor of social influence variables. Finally, the complete mediating path (i.e., the path from acculturation to supervisor self-efficacy to social influence variables) was tested if it is significant using Sobel's (1982) formula with regression coefficients in the mediation model.

Multiple Regressions

For the fifth hypothesis, a series of multiple regression analyses were used to investigate if international supervisors' gender, language preference, and racial appearance are significantly predictive of their SRF-S scores. Participants' gender, language preference, and perceived racial appearance were the predictor variables, and the subscale scores on social influence variables were the criterion variable.

Additionally, conditional analyses were conducted depending upon the degree of distributional differences in order to explore group differences (i.e., less acculturated, bicultural, more acculturated) of participants' AIRS scores. All the research hypotheses, variables of interest, and data analyses are summarized in Table 1.

Table 1. Research Hypotheses, Variables, and Data Analyses

Research Hypotheses	IVs	DVs	Data Analyses
Hypotheses 1: There will be a strong positive linear correlation between the level of international supervisors' self-efficacy and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision	Supervisor Self-Efficacy Social Influence Variables	Social Influence Variables Supervisor Self-Efficacy	Pearson Product Moment Correlations
Hypotheses 2: There will be a strong positive linear correlation between international supervisors' levels of acculturation and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision.	Acculturation Social Influence Variables	Social Influence Variables Acculturation	Pearson Product Moment Correlations
Hypotheses 3: There will be a strong positive linear correlation between international supervisors' perceptions of their self-efficacy and their acculturation levels in cross-cultural dyads of clinical supervision.	Supervisor Self-Efficacy Acculturation	Acculturation Supervisor Self-Efficacy	Pearson Product Moment Correlations
Hypotheses 4: The strong linear correlation between international supervisors' acculturation and social influence variables will be mediated by their self-efficacy in cross-cultural dyads of clinical supervision.	<u>Predictor:</u> Acculturation <u>Mediator:</u> Supervisor Self-Efficacy	Social Influence Variables	Mediating Path Analyses
Hypotheses 5: Supervisors' gender, first language preference (i.e., English vs. non-English), perceived racial appearance will not predict their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision.	<u>Predictor</u> Gender, First language, Perceived racial appearance (i.e., "Person of color" vs. "White")	Social Influence Variables	Multiple Regression

Note: (1) IVs = Independent Variables, (2) DVs = Dependent Variables, (3) Social Influence Variables = Expertness, Attractiveness, and Trustworthiness.

Pilot Study

A pilot study was conducted in the counseling clinic at the researcher's university to determine if the instruments were appropriate to use with international students and international counselor educators in giving a voice to their experiences as international supervisors. Participants were solicited from the researcher's department through e-mail contact. The researcher read an oral script (See Appendix A) to obtain informed consent, informing the participants about 1) the purpose of the study, 2) that their participation was voluntary, and 3) that their information would be confidential unless required by law.

After obtaining informed consent (See Appendix A), participants were asked to complete each questionnaire in the following order: the SRF-S, the CSSES, the AIRS, and the demographic form. In addition, they were asked to provide feedback on the appropriateness, comprehensiveness, readability, and accuracy of each item, as well as the readability of the instructions for each instrument. Three international doctoral students also were asked to provide feedback on item wording and their comprehension levels as non-native speakers. Additional feedback if any also was obtained.

The sample for this pilot study was composed of three international students and two counselor educators with multicultural backgrounds. The ethnic backgrounds of participants were as follows: African, Asian, Middle Eastern, Mexican American, and Cuban American. Participants' first languages were Spanish, Chinese, Kiswahili, and Turkish. The average age of participants in this pilot study was 35 years, and the sample in this pilot included 3 women and 2 men. Participants' supervision training ranged from 0 to 15 months. The years of providing supervision ranged from 1 year to 8 years. The

length of time in the U.S at the time of this pilot study ranged from 1 year and 3 months to 30 years and 5 months. The data were collected individually by the researcher.

Revisions Based on Pilot Study

Results of the pilot study indicated that some wording changes or additions might be needed. For the SRF-S, most participants reported being confused by the instructions because they were not sure if they were asked to rate themselves as supervisors or rate their own supervisors. One participant also suggested the change of item order in the SRF-S since all items of each subscale seem to be placed together. Two participants suggested a change in the title of the CSSES from “supervision questionnaire” to “counselor supervisor self-efficacy scale” would be helpful for the participants to respond more accurately. For the AIRS, some participants reported struggles in rating themselves on certain items because they considered themselves more in the middle ground between “tend to disagree” and “tend to agree.” For the demographic form, some participants suggested that it would be clearer if the researcher indicated “respond to each question as a supervisor” in the instructions, specify type of supervision (i.e., formal, informal, or both) on question # 13, and add “at the time you respond this question” to “what is the highest degree you earned in the U.S.” on question #8.

As a result of the pilot study, the following changes were made:

The SRF-S:

- Edit the instructions:

From: “In this following statement, characteristics followed by a seven-point scale that ranges from “not very” to “very”. Please circle the number

that best represents how you view yourself as a supervisor. Though all of the following characteristics are desirable, supervisors may differ in their strengths. We are interested in knowing how you view these differences.”

To: “*The following 12 characteristics are followed by a seven-point scale that ranges from “not very” to “very”. Please circle the number that best represents how you *perceive* yourself as a supervisor. Though all of the following characteristics are desirable, supervisors may differ in their strengths. We are interested in knowing how you *perceive yourself on these characteristics.*”*

The CSSES:

- Changed the title from “Supervision Questionnaire” to “Counselor Supervisor Self-Efficacy Scale”

The AIRS:

- Added the word “slightly” to the answer choices for questions from # 9 - # 34

Demographic Form:

Added the phrase “respond to each question as a supervisor” to the instructions.

- #2 - changed the phrase “native language” to “first language”.
- #8 - added the words “at this time” to the question “what is the highest degree you have earned in the U.S.?”
- #8 – added the word “master’s” to the answer choice.
- #12 – inserted the word “formal” before “supervision training” in the question for clarification.

CHAPTER IV

RESULTS

The purpose of this study was to investigate the relationship between international supervisors' cultural factors (i.e., acculturation), their perceptions of their supervisor credibility (i.e., social influence variables), and supervisor self-efficacy in cross-cultural dyads of clinical supervision. In this chapter, the results of the statistical analyses are presented in four sections: (a) descriptions of respondents, (b) preliminary analyses (i.e., descriptive statistics and instrument reliabilities), (c) testing of hypotheses, and (d) additional analyses.

Description of Respondents

Selected demographics of participants are summarized in Table 2. Of the 37 participants whose responses were included in the data analysis, 75 % ($n = 27$) were female and 25 % ($n = 10$) were male. The respondents represented 19 countries: 19% from Taiwan ($n = 7$), 14% from Japan ($n = 5$), 8% from China ($n = 4$), 8% from Kenya ($n = 3$), 8% from South Korea ($n = 3$), 6% from Turkey ($n = 2$), 3% from Botswana ($n = 1$), 3% from Canada ($n = 1$), 3% from Hong Kong ($n = 1$), 3% from India ($n = 1$), 3% from Jamaica ($n = 1$), 3% from Malaysia ($n = 1$), 3% from Macedonia ($n = 1$), 3% from Puerto Rico ($n = 1$), 3% from Russia ($n = 1$), 3% from Sri Lanka ($n = 1$), 3% from U.K. ($n = 1$), 3% from Venezuela ($n = 1$), and 3% from an unidentified country in Africa ($n = 1$).

The majority of respondents described themselves as “person of color” (89%, $n = 32$), with all other participants self-identifying as “White” (11%, $n = 4$) except one (3%, $n = 1$) unidentified participant. Respondents ranged in age from 28 years to 78 years ($M = 38.94$, $SD = 9.61$). Eleven (30%) participants indicated English as one of the official languages in their home countries. Participants reported how long they had been in the U.S.: $n = 5$ for less than five years; $n = 18$ for more than 5 years and no more than 10 years; $n = 12$ for more than 10 years. More than half of participants ($n = 28$, 76%) indicated they plan to stay in the U.S. Only 4 participants indicated plans to return to home country.

As for current professional position, 50% ($n = 17$) of the respondents were international doctoral students, 28% ($n = 12$) were international counselor educators, and 22% ($n = 8$) indicated “other” (e.g., research assistant professor, clinical staff). Approximately 76% ($n = 28$) of respondents reported that they were either enrolled or hired in counselor education programs; 24% ($n = 9$) of respondents were hired in a counseling related program (e.g., counseling psychology, marriage and family therapy) at the time of participation. Participants’ highest degrees in U.S. were reported as master’s degree ($n = 15$); doctoral degree ($n = 20$); and other (e.g., special degree, $n = 2$). Thirteen (87%) participants who completed master’s degrees in the U.S. indicated that they were pursuing doctoral degrees in the U.S. at the time of survey. Although 2 (3%) participants were not pursuing U.S. doctoral degrees at the time of survey, they reported they had been in the U.S. for more than 20 years.

In terms of supervision training, all participants ($n = 37$) indicated they had received formal supervision training. Four different types of supervision training were reported: 37 for an academic supervision course; 13 for a supervision workshop; 7 for a supervision seminar; and 9 for supervised supervision. Nineteen (51%) participants reported that they had received more than one type of supervision training and 8 (49%) participants indicated that an academic supervision course was their only supervision training at the time of survey. Participants indicated the length of supervision training was less than 4 months ($n = 7$); more than 4 months and no more than 12 months ($n = 7$); and more than 12 months ($n = 22$).

Table 2. Participant Demographics

Variables	<i>n</i>	%
GENDER		
Female	27	75
Male	10	25
AGE		
Younger than 35 years	11	30
35 years old ~ 50 years old	20	54
Older than 50 years	5	14
Not reported	1	3
HOME COUNTRY BY CONTINET		
Asia	24	65
Africa	6	16
Europe	4	11
Latin America	2	5
North America	1	3
Staff psychologist	1	3
MFT supervisor	1	3
Not specified	4	11

Table 2. Participant Demographics (Continued)

Variables	<i>n</i>	%
CUREENT POSITION		
Doctoral students	17	46
Counselor educators	12	32
Others		
Clinical assistant professor	1	3
Staff counselor at university counseling center	1	3
ENGLISH LANGUAGE AS OFFICIAL (i.e. first language preference)		
Yes	11	30
No	26	70
HIGHEST DEGREE OUTSIDE OF U.S.		
Bachelor	20	54
Master's	9	24
Specialist	1	3
Doctoral	6	16
Others (i.e., high school diploma)	1	3
HIGHEST DEGREE IN U.S.		
Master's	15	41
Special	0	0
Doctoral	20	54
Other	2	5
SUPERVISION TRAINING		
Type of Training (Choose more than one)		
Academic course	37	100
Workshop	13	35
Seminar	7	19
Supervision of supervision	9	24
Length of Training		
Less than 4 months	10	27
4 months ~ 12 months	23	62
More than 12 months	4	11
SUPERVISION PROVIDED		
Type of Supervision (Choose more than one)		
Individual	35	95
Triadic	14	38
Group	27	73
Other		
Online	1	3
Bug-in ear	1	3
Pre-practicum	1	3

Table 2. Participant Demographics (Continued)

Variables	<i>n</i>	%
Length of Supervision		
Less than 4 months	7	19
4 months ~ 12 months	7	19
More than 12 months	22	59
Not reported	1	3
SUPERVISEE (Choose more than one)		
Master's Practicum students	30	81
Master's Internship students	29	78
Other:	15	41
Pre-practicum students	1	3
Master's post-internship students	1	3
Doctoral student	1	3
Doctoral practicum students	3	8
Doctoral internship students	4	11
Doctoral externship students	1	3
Psychology interns	1	3
Post-master (MFT associate/professional) interns	1	3
Licensed counselor	1	3
Clinicians	1	3
LENGTH OF TIME LIVED IN U.S.		
Less than 5 years	5	14
5 years ~ 10 years	16	49
More than 10 years	16	32
RESIDENCY PLAN		
Stay in U.S.	28	76
Return to home country	4	11
Other: Undecided/Not sure	1	3
Canada	1	3
Missing/Not reported	3	8
PERCEIVED RACIAL APPEARANCE		
Person of Color	32	86
White	4	11
Missing/Not reported	1	3

Preliminary Analyses

Since the sample size was small, participants from counseling related programs (i.e., marriage and family therapy program, counseling psychology program) were added to the target sample (i.e., participants from CACREP-accredited counselor education programs). Prior to conducting reliability analyses, a one-way MANOVA was performed comparing the mean difference of all variables (i.e., three subscales of SRF-S, the total score of the CSSES, and three subscales of the AIRS - *dependent variables*) for participants from two subgroups (i.e., counselor education program, counseling related program – *independent variable*). No significant differences were found between the two groups ($F(7, 26), p < .05, \eta^2 = .11$). Thus, the two groups were combined and the sample as whole was used in subsequent analyses.

Descriptive statistics (i.e., mean scores and standard deviation of all of study variables) for participants from the two subgroups are compared in Table 4, and the one way MANOVA analysis results are presented in Table 5. The scores of the AIRS subscales were reversed for this study. Thus, higher scores on all the three AIRS indicate higher acculturation to the U.S culture, whereas lower scores on those indicate lower levels of acculturation.

Descriptive Statistics for All Variables

In Table 3, descriptive statistics, including sample score ranges, means, and standard deviations were calculated for all scales and subscales administered in the study. The mean scores of these variables were found to be compatible to ones in previous studies of supervision: a) higher than mean scores of the SRF-S in Young (1996) study

with U.S. supervisees; b) lower than mean scores of CSSES in Barnes' (2002) study with clinical supervisors; and c) higher than mean scores of the AIRS in Nilsson (1999) with international supervisees.

Table 3. Sample Score Ranges, Means, and Standard Deviations

	Possible Range	Sample Range	Sample Mean	Sample SD	Skewness
SRF- S					
Expertness	4 - 28	8 - 28	20.68	4.06	-1.423
Attractiveness	4 - 28	15 - 28	23.49	3.40	-.732
Trustworthiness	4 - 28	20 - 28	25.51	2.27	-.803
CSSES	0 - 351	205 - 343	290.00	37.22	-.718
AIRS					
Perceived Prejudice	20 - 120	44 - 107	78.36	13.55	-.039
Acculturation	11 - 61	15 - 43	31.00	7.06	-.275
Language Use	3 - 15	5 - 15	8.51	2.35	1.112

Note: 1) SRF-S = Supervisor Rating Form – Short, 2) CSSES = Counselor Supervisor Self-Efficacy Scale, and 3) AIRS = American International Relations Scale.

Table 4. Descriptive Statistics by Type of Counseling Program

Variables	Counselor Education Programs (n = 28)		Counseling Related Programs (n = 9)	
	Mean	SD	Mean	SD
Supervisor Rating Form – Short				
Expertness	20.62	4.50	20.50	3.46
Attractiveness	23.00	3.50	24.00	3.30
Trustworthiness	25.20	2.50	26.13	1.55
Counselor Supervisor Self-Efficacy Scale	287.08	37.65	305.38	32.42
American International Relations Scale				
Perceived Prejudice	76.31	13.16	81.75	14.48
Acculturation	30.54	7.13	31.75	7.09
Language Use	8.35	2.26	9.00	3.12

Table 5. MANOVA: Main Effects of Type of Counseling Program

	Value	<i>F</i>	Hyp df	Error df	η^2
Wilks' Lambda	.89	.47	7	26	.11

*Significant at $p < .05$

Reliabilities of Instruments

Cronbach's alpha was calculated to measure internal consistency for each scale. All estimates of internal consistency were found to be acceptable for social science research (Wampold, Kivlighan, & Heppner, 2007), ranging from $\alpha = .80$ to $\alpha = .90$, with only one estimate falling below .80 (i.e., $\alpha = .79$ for the AIRS-Language Use). Reliability coefficients for each construct in the Supervisor Rating Form -Short, the Counselor Supervisor Self-Efficacy Scale, and the American International Relations Scale are presented in Table 6, along with coefficients from previous studies (Barnes, 2002; Corrigan & Schmidit, 1983, Nilsson & Anderson, 2004; Mejeda, 2002; Mori et al., 2009; Sadowsky & Plake, 1991).

Table 6. Instrument Scale Reliabilities

Instruments	# of items	α in current sample	α in previous studies
Supervisor Rating Form – Short			
Expertness	4	.90	.86
Attractiveness	4	.85	.85
Trustworthiness	4	.80	.85
Counselor Supervisor Self-Efficacy Scale	39	.98	.97
American International Relations Scale			
Perceived Prejudice	20	.87	.87
Acculturation	11	.80	.76
Language Use	3	.79	.82

Main Analyses

Testing of Research Hypotheses

The primary purpose of this study was to explore the relationships among international supervisors' perceptions of their social influence variables, clinical supervisor self-efficacy, and acculturation in cross-cultural dyads of clinical supervision. Five research questions and hypotheses were developed to answer this question. In this section, results of the statistical analyses used to examine these questions and hypotheses are presented.

Research Question 1

Is there a strong linear correlation between the levels of international supervisors' self-efficacy and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

Research Hypothesis 1

There will be a strong positive linear correlation between the levels of international supervisors' self-efficacy and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision.

Pearson product-moment correlation analysis was used to test this research question, and the results of SPSS revealed that expertness ($r = .47$), attractiveness ($r = .39$), and trustworthiness ($r = .66$) scores were positively correlated with the CSSES total score; all correlations were also significant ($p < .05$). This means that international supervisors with higher levels of self-efficacy believed that they possessed more expertness, attractiveness, and trustworthiness in working with U.S.-born supervisees. The correlation matrix among the variables is presented in Table 7.

Table 7. Correlation Matrix between Supervisor Self-Efficacy and Social Influence Variables

Variables	Supervisor Self-Efficacy	Expertness	Attractiveness	Trustworthiness
Supervisor Self-Efficacy	1.00			
Expertness	.47**	1.00		
Attractiveness	.39*	.20	1.00	
Trustworthiness	.66**	.71*	.54**	1.00

**Correlation is significant at the $p < .01$ (2-tailed)

*Correlation is significant at the $p < .05$ (2-tailed)

Research Question 2

Is there a strong linear correlation between international supervisors' levels of acculturation and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

Research Hypothesis 2

There will be a strong positive linear correlation between international supervisors' levels of acculturation and their perceptions of their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision.

Pearson product-moment correlation analysis was used to test this research question, and the results of SPSS revealed that these two variables were not significantly correlated, in general. However, a positive significant correlation ($r = .37, p < .05$) was found between AIRS-Perceived Prejudice subscale and attractiveness. Thus, international supervisors who felt more accepted by people in U.S. (i.e., more acculturated) believed that they possessed greater expertness when working with U.S-born supervisees, and vice versa. Table 8 displays the correlation matrix among the six variables.

Table 8. Correlation Matrix between the AIRS subscales and Social Influence Variables

Variables	Perceived Prejudice	Acculturation	Language Use	Expertness	Attractive- ness	Trust- worthiness
Perceived Prejudice	1.00					
Acculturation	.39*	1.00				
Language Use	.15	.27	1.00			
Expertness	-.15	.10	.10	1.00		
Attractiveness	.37*	.07	.02	.20	1.00	
Trustworthiness	.10	.02	.02	.71**	.54**	1.00

**Correlation is significant at the $p < .01$ (2-tailed)

*Correlation is significant at the $p < .05$ (2-tailed)

Research Question 3

Is there a strong linear correlation between international supervisors' perception of their self-efficacy and their acculturation levels in cross-cultural dyads of clinical supervision?

Research Hypothesis 3

There will be a strong positive linear correlation between international supervisors' perception of their self-efficacy and their acculturation levels in cross-cultural dyads of clinical supervision.

Pearson product-moment correlation analysis was used to test this research question. According to the SPSS results, all three subscales (i.e., Perceived Prejudice, Acculturation, Language Use) of the AIRS were weakly and positively correlated the CSSES; the correlations were not significant ($p > .05$). Thus, international supervisors' acculturation levels were not related to their perceptions of supervisor self-efficacy. Table 9 displays the correlation matrix between the CSSES and the three subscales of the AIRS.

Table 9. Correlation Matrix between Supervisor Self-Efficacy and the AIRS subscales

Variables	Supervisor Self-Efficacy	Perceived Prejudice	Acculturation	Language Use
Supervisor Self-Efficacy	1.00			
Perceived Prejudice	.06	1.00		
Acculturation	.11	.39*	1.00	
Language Use	.31	.15	.27	1.00

**Correlation is significant at the $p < .01$ (2-tailed)

*Correlation is significant at the $p < .05$ (2-tailed)

Research Question 4

Is the strong linear correlation between international supervisors' acculturation and their social influence variables mediated by their self-efficacy in cross-cultural dyads of clinical supervision?

Research Hypothesis 4

The strong linear correlation between international supervisors' acculturation and their social influence variables will be mediated by their self-efficacy in cross-cultural dyads of clinical supervision.

Research question 4 examined if supervisor self-efficacy (i.e., *mediating variable*) mediates the relationship between the level of acculturation (i.e., *independent variables*) and social influence variables (i.e., *dependent variables*). The Pearson correlation analysis was performed to see if these variables met the initial conditions for the mediation models (Figure 1) hypothesized in this study (Baron & Kenny, 1986). Since both an independent variable and dependent variable had three subscales, nine hypothesized mediation models were tested in this study. Figure 3 ~ 12 display the nine

hypothesized mediation models including path coefficients. A series of multiple regression analyses were performed to test the mediation models.

Figure 3 Hypothesized Mediation Model 1: Perceived Prejudice and Expertness

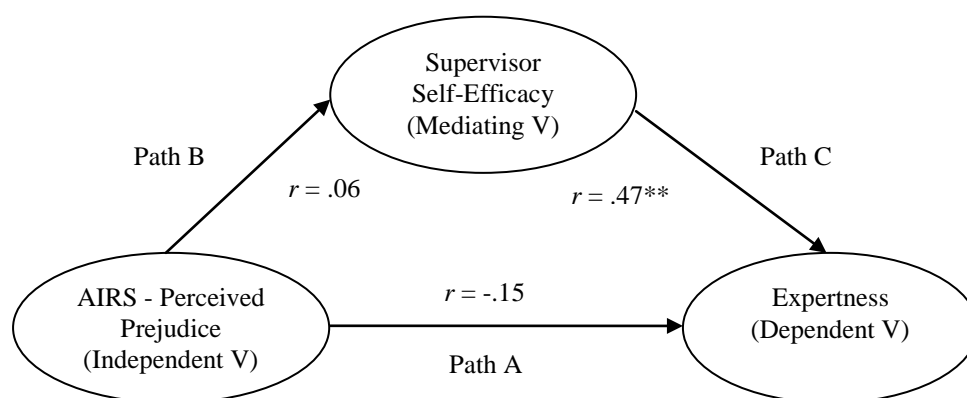


Figure 4 Hypothesized Mediation Model 2: Perceived Prejudice and Attractiveness

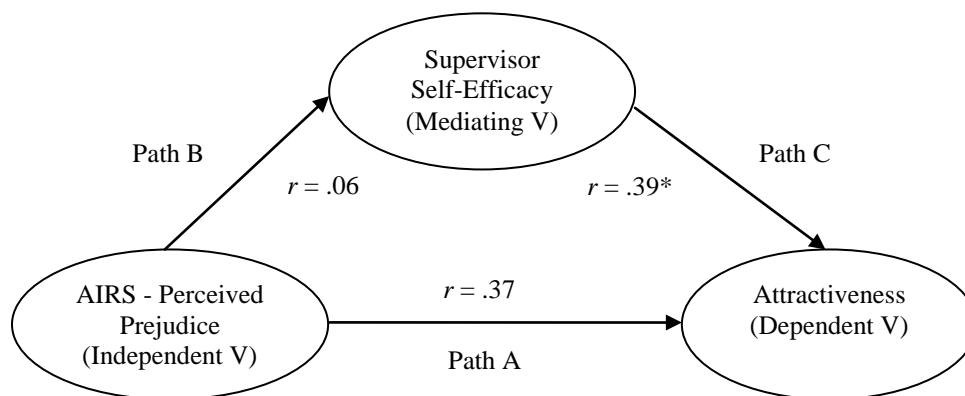
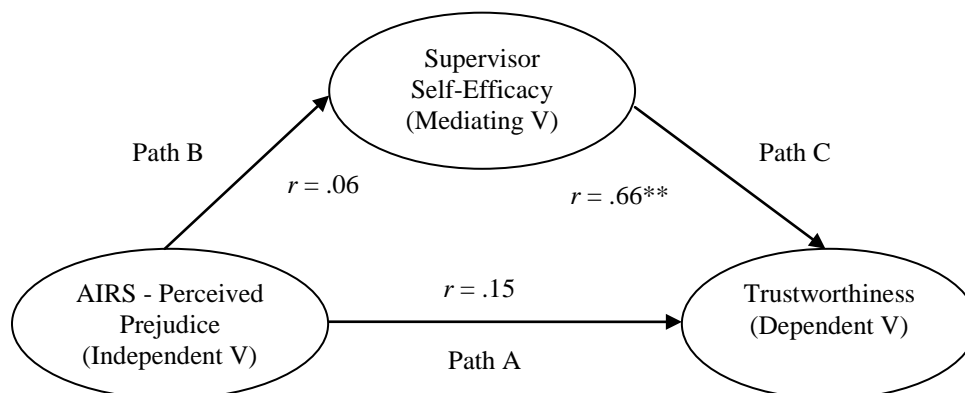


Figure 5 Hypothesized Mediation Model 3: Perceived Prejudice and Trustworthiness



Note: 1) r = correlation coefficients, 2) *Significant at $p < .05$

Figure 6 Hypothesized Mediation Model 4: Acculturation and Expertness

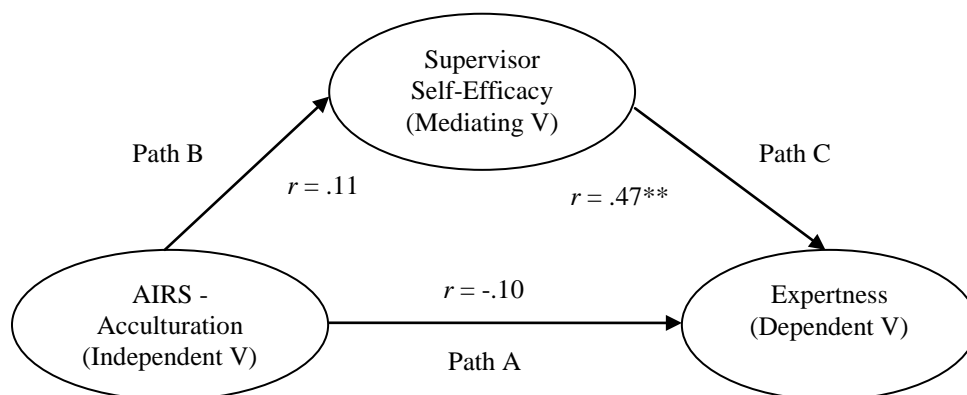


Figure 7 Hypothesized Mediation Model 5: Acculturation and Attractiveness

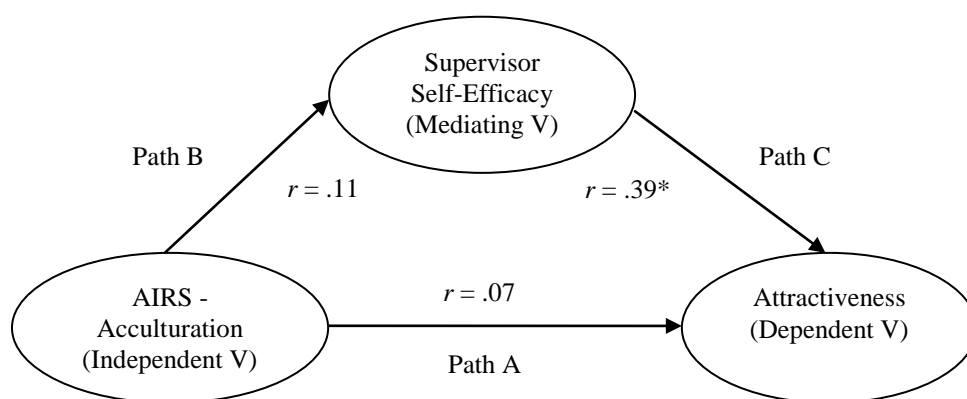
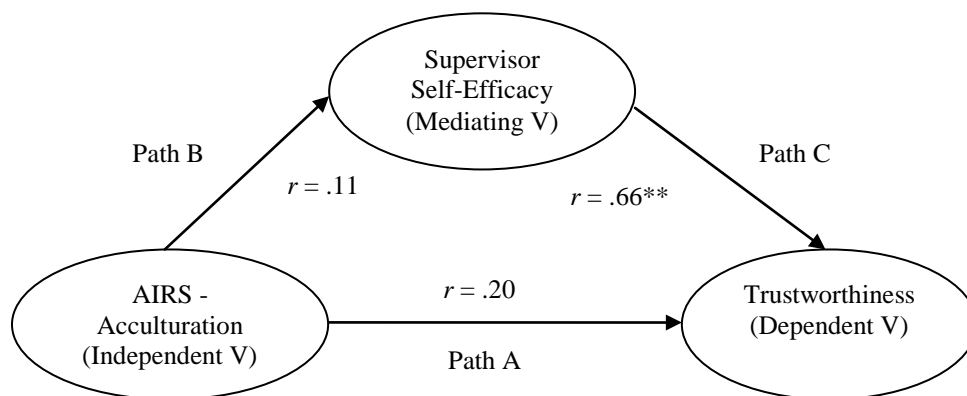


Figure 8 Hypothesized Mediation Model 6: Acculturation and Trustworthiness



Note: 1) r = correlation coefficients, 2) *Significant at $p < .05$

Figure 9 Hypothesized Mediation Model 7: Language Use and Expertness

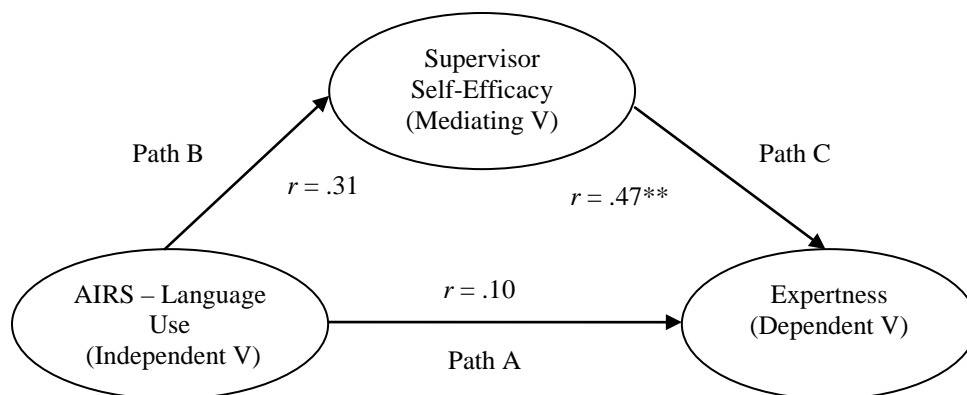


Figure 10 Hypothesized Mediation Model 8: Language Use and Attractiveness

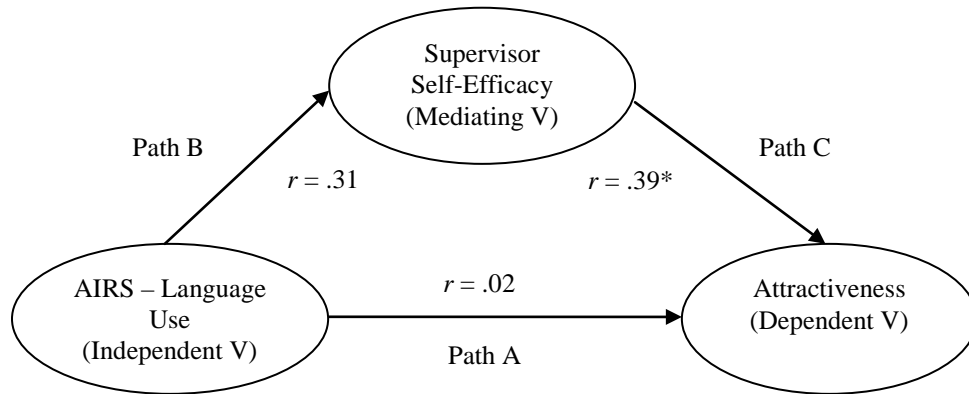
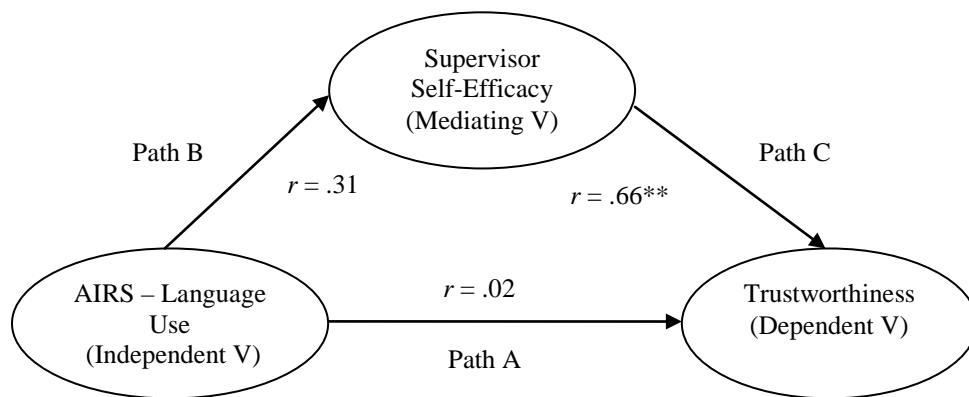


Figure 11 Hypothesized Mediation Model 9: Language Use and Trustworthiness



Note: 1) r = correlation coefficients, 2) *Significant at $p < .05$

Correlation analyses revealed that supervisor self-efficacy was correlated with perceived expertness ($r = .47$), attractiveness ($r = .39$), and trustworthiness ($r = .66$) (Hypothesis 1), but it was not correlated with the level of acculturation, except the AIRS-Perceived Prejudice subscale (Hypothesis 2) which was significantly correlated with attractiveness ($r = .37, p < .05$). No significant correlation was found between supervisor self-efficacy and the levels of acculturation (Hypothesis 3). Thus, these variables did not meet the initial conditions for mediation. Table 10 displays all correlations between the variables used for the nine mediation models.

Table 10. Correlation Matrix between the AIRS, the CSSES, and the SRF-S

Variables	Perceived Prejudice	Acculturation	Language Use	Supervisor Self-Efficacy	Expertness	Attractiveness	Trustworthiness
Perceived Prejudice	(.87) .38*	(.80)					
Acculturation	.15	.27	(.79)				
Language Use	.06	.11	.31	(.98)			
Supervisor Self-Efficacy	-.15	-.10	.10	.47**	(.90)		
Expertness	.37*	.07	.02	.39*	.20	(.85)	
Attractiveness	.15	.20	.02	.66**	.71**	.54**	(.80)
Trustworthiness							

Note: (1) Perceived Prejudice, Acculturation, and Language Use = Subscales for the American International Relations Scale (AIRS), (2) Supervisor Self-Efficacy = the Counselor Supervisor Self-Efficacy Scale (CSSES), (3) Expertness, Attractiveness, and Trustworthiness = Subscales for the Supervisor Rating Form – Short (SRF-S), and (4) Instrument reliabilities are placed along the diagonal in parentheses.

*Significant at the $p < .05$ level

**Significant at the $p < .01$ level

When both supervisor self-efficacy and acculturation variables were used as predictors for social influence variables in running multiple regression analyses, direct paths (i.e., path A in Figure 1) between acculturation and social influence variables were not reduced. This result confirmed that supervisor self-efficacy did not mediate the effect of the level of acculturation on perceived expertness, attractiveness, and trustworthiness. Results of multiple regressions for the mediation models were presented in Table 11 ~ 19.

Table 11. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Perceived Prejudice and Expertness

Model	R	Variable	Std. Error	β	t
1	.17	Perceived Prejudice	.06	-.17	-.97
2	.53	Perceived Prejudice	.05	-.20	-1.29
		Supervisor Self-Efficacy	.02	.50	3.28*

a. Defendant Variable: Expertness
b. Significant at the $p < .05$

Table 12. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Perceived Prejudice and Attractiveness

Model	R	Variable	Std. Error	β	t
1	.34	Perceived Prejudice	.04	.34	.05
2	.54	Perceived Prejudice	.04	.32	2.10
		Supervisor Self-Efficacy	.01	.42	2.74

a. Defendant Variable: Attractiveness
b. Significant at the $p < .05$

Table 13. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Perceived Prejudice and Trustworthiness

Model	R	Variable	Std. Error	β	t
1	.10	Perceived Prejudice	.03	.10	.58
2	.69	Perceived Prejudice	.02	.07	.45
		Supervisor Self-Efficacy	.01	.68	5.21*

a. Defendant Variable: Trustworthiness

b. Significant at the $p < .05$

Table 14. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Acculturation and Expertness

Model	R	Variable	Std. Error	β	t
1	.11	Acculturation	.10	-.11	-.64
2	.49	Acculturation	.09	-.16	-1.06
		Supervisor Self-Efficacy	.02	.48	3.12*

a. Defendant Variable: Expertness

b. Significant at the $p < .05$

Table 15. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Acculturation and Attractiveness

Model	R	Variable	Std. Error	B	t
1	.08	Acculturation	.09	.08	.44
2	.39	Acculturation	.08	.04	.21
		Supervisor Self-Efficacy	.02	.39	2.35

a. Defendant Variable: Attractiveness

b. Significant at the $p < .05$

Table 16. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Acculturation and Trustworthiness

Model	R	Variable	Std. Error	B	t
1	.17	Acculturation	.06	.17	.99
2	.67	Acculturation	.04	.10	.75
		Supervisor Self-Efficacy	.01	.65	4.87*

a. Defendant Variable: Trustworthiness

b. Significant at the $p < .05$

Table 17. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Language Use and Expertness

Model	R	Variable	Std. Error	B	t
1	.10	Language Use	.30	.10	.56
2	.47	Language Use	.28	-.05	-.31
		Supervisor Self-Efficacy	.02	.48	2.93*

a. Defendant Variable: Expertness

b. Significant at the $p < .05$

Table 18. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Language Use and Attractiveness

Model	R	Variable	Std. Error	B	t
1	.01	Language Use	.25	.05	.05
2	.41	Language Use	.24	-.71	-.71
		Supervisor Self-Efficacy	.02	2.51	2.51

c. Defendant Variable: Attractiveness

a. Significant at the $p < .05$

Table 19. Multiple Regression: Supervisor Self-Efficacy as a Mediator of Language Use and Trustworthiness

Model	R	Variable	Std. Error	B	t
1	.01	Language Use	.17	.01	.05
2	.69	Language Use	.13	-.21	-1.58
		Supervisor Self-Efficacy	.01	.72	5.36*

a. Defendant Variable: Trustworthiness

b. Significant at the $p < .05$

Research Question 5

To what extent do international supervisors' gender, their first language preference (i.e., English vs. Non-English), and their perceived racial appearance (i.e., "Person of Color" vs. "White") predict their expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision?

Research Hypothesis 5

Supervisors' gender, their first language preference (i.e., English vs. Non-English), and their perceived racial appearance (i.e., "Person of color" vs. "White") will not predict their expertness, attractiveness, and trustworthiness.

A series of multiple regressions analyses were performed to investigate which variables might be the most important variable in predicting perceived social influence variables. All demographic variables were dummy coded and used as dichotomous variables. In addition, collinearity diagnostics were conducted to see how the independent variables were related to the dependent variables. The statistics indicated that multicollinearity might not be an issue in Research Question 5. No significant predictor for social influence variables was found, supporting Hypothesis 5. Tables 20, 21, and 22 contain the results of each regression analysis.

Table 20. Multiple Regression: Predictors of Expertness

Model	R	Std. Error	β	t	Zero-order	Partial
	.37					
Gender		1.54	.15	.86	.20	.15
Language Preference		1.46	-.10	-.61	-.10	-.11
Racial Appearance		2.17	-.30	-1.79	-.34	-.30

a. Dependent variable: Expertness

b. Significant at the $p < .05$

Note: (1) Language Preference = English as one of Official Language. (2) Racial Appearance = Perceived Racial Appearance (i.e., "Person of Color" vs. "White").

Table 21. Multiple Regression: Predictors of Attractiveness

Model	R	Std. Error	β	t	Zero-order	Partial
	.17					
Gender		1.35	-.05	-.25	-.05	-.04
Language Preference		1.28	.12	.67	.12	.12
Racial Appearance		1.91	.11	.61	.12	.11

a. Dependent variable: Attractiveness

b. Significant at the $p < .05$

Note: (1) Language Preference = English as one of Official Language. (2) Racial Appearance = Perceived Racial Appearance (i.e., "Person of Color" vs. "White").

Table 22. Multiple Regression: Predictors of Trustworthiness

Model	R	Std. Error	β	t	Zero-order	Partial
	.05					
Gender		.92	.02	.13	.04	.02
Language Preference		.88	.03	.17	.03	.03
Racial Appearance		1.30	-.03	-.17	-.04	-.04

a. Dependent variable: Expertness

b. Significant at the $p < .05$

Note: (1) Language Preference = English as one of Official Language. (2) Racial Appearance = Perceived Racial Appearance (i.e., "Person of Color" vs. "White").

In addition to Research Question 5, another multiple regressions analysis was tested to investigate which variables might be the most important variable in predicting supervisor self-efficacy. No significant predictor for supervisor self-efficacy was found.

Table 23 displays the statistical results.

Table 23. Multiple Regression: Predictor of Supervisor Self-Efficacy

	R	Std. Error	β	T	Zero-order	Partial
	.31					
Gender		14.77	.10	.53	.04	.10
Language Preference		14.36	-.30	-1.71	-.28	-.30
Racial Appearance		20.72	.09	.48	.05	.09

a. Dependent variable: Counselor Supervisor Self-Efficacy

b. Significant at the $p < .05$

Note: (1) Language Preference = English as one of Official Language. (2) Racial Appearance = Perceived Racial Appearance (i.e., "Person of Color" vs. "White").

Additional Analyses

Descriptive Statistics for Selected Subgroups

Table 24 displayed mean scores and standard deviation of all variables (i.e., social influence variables, counselor supervisor self-efficacy, and acculturation levels) for two subgroups (i.e., "Person of Color", "White"). The subgroup "Person of Color" indicated slightly higher mean scores on all the study variables (i.e., expertness, attractiveness, supervisor self-efficacy) except attractiveness as well as the three subscales of AIRS (i.e., perceived prejudice, acculturation, and language use) compared with the scores of subgroup "White". The subgroup "Person of Color" showed slightly lower mean scores than the total mean scores of the current study in terms of those study variables.

Table 24. Total and Compared Means between Selected Subgroups of Self-Identified “Person of Color” and “White”

Variables	Total (<i>n</i> = 33)		“Person of Color” (<i>n</i> = 29)		“White” (<i>n</i> = 4)	
	Mean	SD	Mean	SD	Mean	SD
SRF-S						
Expertness	20.52	4.27	21.03	3.81	16.75	6.13
Attractiveness	23.33	3.43	23.14	3.49	24.75	2.99
Trustworthiness	25.36	2.34	25.38	2.37	25.25	2.50
CSES	291.33	37.43	290.79	38.51	295.25	32.83
AIRS						
Perceived Prejudice	77.73	13.65	76.10	13.51	89.50	8.54
Acculturation	30.73	7.12	29.55	6.68	39.25	3.77
Language Use	8.48	2.49	8.24	2.34	10.25	3.20

* *n* = 4 for missing data (i.e., *n* = 1 for perceived racial appearance, *n* = 2 for CSES, *n* = 1 for AIRS-acculturation)

In Table 25, mean scores and deviations of the study variables for another subgroups (i.e., *n* = 19 for the group “Shorter Stay” = participants who have been in the U.S. for less than 8 years, *n* = 15 for the group “Longer Stay” = participants who have been in the U.S. for either 8 years or more than 8 years) divided by the length of time stayed in the U.S. were compared. The group “Longer Stay” indicated higher mean scores on expertness, trustworthiness, supervisor self-efficacy, and the AIRS-Langue Use, but lower scores on attractiveness, the AIRS-Perceived Prejudice, and the AIRS-Acculturation compared with the group “Shorter Stay.”

Table 25. Total and Compared Means between Selected Subgroups divided by Length of Time Lived in the U.S.

Variables	Total (<i>n</i> = 34)		Shorter Stay (<i>n</i> = 14)		Longer Stay (<i>n</i> = 20)	
	Mean	SD	Mean	SD	Mean	SD
SRF-S						
Expertness	20.59	4.23	18.64	4.68	21.95	3.36
Attractiveness	23.24	3.43	23.71	3.83	22.90	3.18
Trustworthiness	25.41	2.32	24.86	2.32	25.80	2.31
CSSSES	291.38	36.86	274.93	37.96	302.90	32.17
AIRS						
Perceived Prejudice	77.59	13.46	83.50	11.57	73.45	13.39
Acculturation	30.82	7.03	31.79	6.73	30.15	7.34
Language Use	8.50	2.45	8.29	3.20	8.65	1.84

* *n* = 3 for missing data (i.e., *n* = 2 for items on CSSSES, *n* = 1 for one item on AIRS- Acculturation)

Table 26 displayed mean scores and standard deviation of all variables (i.e., social influence variables, counselor supervisor self-efficacy, and acculturation levels) for two subgroups (i.e., *n* = 19 for Novice Supervisors = participants who had provided supervision for less than 12 months, *n* = 14 for Experienced Supervisors = participants who had provided supervision either for 12 months or for more than 12 months). “Novice Supervisors” indicated higher mean scores on attractiveness, trustworthiness, AIRS-Perceived Prejudice, and the AIRS-Acculturation, whereas “Experienced Supervisors” indicated higher mean scores on expertness, supervisor self-efficacy, and the AIRS-Language Use.

Table 26. Total and Compared Means between Selected Subgroups divided by Supervision Experience

Variables	Total (<i>n</i> = 33)		Novice Supervisors (<i>n</i> = 12)		Experienced Supervisors (<i>n</i> = 21)	
	Mean	SD	Mean	SD	Mean	SD
SRF-S						
Expertness	20.48	4.25	20.42	4.36	20.52	4.30
Attractiveness	23.15	3.45	24.25	2.67	22.52	3.74
Trustworthiness	25.36	2.34	25.67	2.15	25.19	2.48
CSSSES	291.09	37.39	283.67	38.95	295.33	36.75
AIRS						
Perceived Prejudice	77.15	13.42	78.67	13.73	76.29	13.51
Acculturation	30.73	7.13	30.75	7.15	30.71	7.28
Language Use	8.52	2.49	7.50	1.51	9.10	2.77

* *n* = 4 for missing data (i.e., *n* =1 for length of supervision provided, *n* =2 for items on CSSSES, *n* =1 one item on for AIRS- acculturation)

According to Sodowsky and Plake (1992), the range for biculturalism is computed by adding a middle score for each item. However, the actual score range for each acculturation level (i.e., less acculturated, biculturalized, more acculturated) was not found in previous studies. Thus, in the present study, the two acculturation groups (i.e., less acculturated, more acculturated) were defined by computing the score range before and after the bicultural range: Less Acculturated group (*n* = 8) for the AIRS total scores range from 34 to 101; Bicultural group (*n* = 18) for the AIRS total scores range from 102 to 128; More Acculturated group (*n* = 8) for the AIRS total scores range from 129 to 196. In Table 27, mean scores and standard deviations of all the study variables for the three subgroups were displayed. The mean scores of all the study variables, except expertness,

were enhanced as the levels of acculturation increased. For expertness, the mean scores of all the study variables were decreased as the levels of acculturation increased.

Table 27. Total and Compared Means between Selected Subgroups divided by Acculturation Level

Variables	Less Acculturated (<i>n</i> = 8)		Bicultural (<i>n</i> = 18)		More Acculturated (<i>n</i> = 8)	
	Mean	SD	Mean	SD	Mean	SD
SRF-S						
Expertness	21.25	3.54	20.57	4.04	19.89	4.91
Attractiveness	22.25	3.24	22.62	3.51	26.11	1.76
Trustworthiness	24.75	2.66	25.19	2.48	26.33	1.94
CSSSES	286.12	45.74	287.55	37.85	299.13	25.03
AIRS						
Perceived Prejudice	61.75	8.80	77.20	5.83	95.22	7.66
Acculturation	22.75	5.63	31.66	6.15	35.22	6.08
Language Use	7.38	1.77	8.62	2.29	9.33	2.65

* *n* = 3 for missing data (i.e., *n* = 2 for items on CSSSES, *n* = 1 one item on for AIRS- acculturation)

Correlation Matrix for the Study Variables

Pearson product-moment correlation analysis was performed among all the study variables, and the correlation matrix is presented earlier in this chapter (Table 10).

Statistically significant correlations were found between Counselor Supervisor Self-Efficacy and all Social Influence variables. However, only Perceived Prejudice among the three ARIS subscales was significantly correlated with Counselor Supervisor Self-Efficacy.

Summary

This chapter demonstrated results of the study. Demographics of the sample were described. Results of preliminary analyses, including instrument reliabilities and descriptive statistics were provided. Data analyses for each hypothesis and the results were reported. Selected subgroups were compared in terms of mean scores and standard deviations on all the study variables. Results indicated that international supervisors' supervisor self-efficacy was positively correlated with social influence variables but was not related to acculturation. Perceived prejudice was significantly correlated with perceived expertness. Supervisor self-efficacy was not found to serve a mediation role of the relationship between acculturation and social influence variables. Gender, first language preference, and perceived racial appearance did not significantly predict perceived social influence variables. Results integrated with previous literature, limitations, and directions for future research, and implications for counselor educators are discussed in Chapter V.

CHAPTER V

DISCUSSION

This chapter provides a discussion of results of the study, including (a) an interpretation of the study findings, (b) a description of study limitations, (c) directions for future research, and (d) implications for counselor educators and clinical supervisors.

Overview

This study investigated factors (i.e., acculturation, supervisor self-efficacy) that might impact international supervisors' self-perceptions of their supervisor credibility (i.e., social influence variables) in cross-cultural dyads of clinical supervision. First, the relationships between perceived social influence variables (i.e., expertness, attractiveness, and trustworthiness), supervisor self-efficacy, and acculturation were examined. Second, a mediating model was tested with these variables. Finally, demographic variables (i.e., gender, language preference, and perceived racial appearance) that might account for perceived social influence variables were explored.

Results indicated that international supervisors' supervisor self-efficacy was positively correlated with social influence variables but was not related to acculturation. Only one aspect of acculturation, perceived prejudice, was significantly correlated with only one aspect of social influence, perceived attractiveness. Contrary to the hypothesized model, supervisor self-efficacy did not mediate the relationship between acculturation and social influence variables.

In addition, gender, first language preference, and perceived racial appearance did not significantly predict perceived social influence variables. Overall, supervisor self-efficacy had a significant and broader impact on international supervisors' perceived social influence variables, compared with their acculturation levels. A discussion of the results, related preliminary analyses, research hypotheses, and supplementary analyses integrated with previous literature follows.

Interpretation of the Study Findings

This was the first empirical study of the relationship between self-efficacy and social influence variables with international supervisors. As expected, international supervisors' self-efficacy was positively related to perceived expertness, attractiveness, and trustworthiness in cross-cultural dyads of clinical supervision. This finding is consistent with Watkins' (1990) model of supervisor development which suggests that supervisor self-efficacy increases as supervisors develop their expertise in supervision. This finding also supports Barnes' (2002) speculation that supervisors' self-efficacy could affect their social influence variables. In the current study, trustworthiness ($r = .66$) had a stronger relationship with supervisor self-efficacy than did expertness ($r = .47$) and attractiveness ($r = .39$). Researchers have suggested that supervisors' ability to maintain an effective supervisory relationship is more important than their technical skills (Borders & Fong, 1994; Dye, 1994). Nilsson and Anderson (2004) proposed that a strong supervisory working alliance might be a foundation for developing counseling self-efficacy of international students. International supervisors may value positive supervisory relationships highly in promoting supervisees' clinical and personal

development and may make efforts to establish trustworthy relationships with their supervisees. Their efforts might then affect their feelings of efficacy as supervisors.

Perceived prejudice (acculturation) and perceived attractiveness were positively related. Since the AIRS subscale scores were reversed in this study, higher scores on the AIRS- perceived prejudice subscale indicated higher levels of acculturation but lower degree of perceived prejudice. In other words, the less the supervisors felt perceived prejudice, the more they perceived ability to use attractiveness, in which they were more compatible to their supervisees. This result supports Kaiser's view (1997) that the more compatibility or similarity supervisors share in cross-cultural supervision dyads, the more likable they can be viewed by their supervisees.

This also may be line with the findings of Nilsson and Dodds (2006): more discussion of cultural issues in supervision happened when international supervisees worked with supervisors of color compared when they worked with White supervisors. Thus, international supervisors may perceive their attractiveness higher when they believe that can be viewed as compatible as their supervisees. The weak correlations between the other acculturation subscales (i.e., acculturation – acceptance of U.S. culture, language use) and social influence variables were unexpected. These findings seem to contradict Nilsson and Anderson's (2004) findings for supervisees using the same acculturation measure. They reported that the degree of acceptance of American and U.S culture affected international student supervisees' perceptions of their knowledge and confidence in diversity issues. They suggested that international students' greater acceptance of the U.S. culture might result in gaining more knowledge about the U.S.

culture as they are involved in the U.S. culture, which then might increase their awareness of diversity and self-confidence in responding to diversity issues in the U.S. In addition, since many counseling skills are based in Euro-American cultures, Nilsson and Anderson (2004) proposed that more acceptance of the U.S. culture may be related to greater confidence in performing counseling skills.

Differences between international supervisors and supervisees may help explain the different results. Many participants in the current study either had obtained or were pursuing doctoral degrees in the U.S. at the time of the study, which may require most of them to have spent more time in the U.S (e.g., $M = 12$ years for the length of time stayed in the U.S.) and to have received more either clinical training or practice (e.g., $M = 29$ months for the length of time supervision provided) compared to international supervisees. International supervisors' perceived expertness may increase as they gain specialized training, knowledge, confidence, and professional credentials through their doctoral training and clinical experiences (Barnes, 2002; Borders et al., 1996, Haley, 2001; Stevens, Goodyear, & Robertson, 1997). It is possible that the longer international supervisors stayed in the host country, the more comfortable they felt about the adjustment process (i.e., accepting host culture, second language use). Thus, acceptance of U.S. culture and language use variables may be less influential than clinical training and experiences in affecting international supervisors' perceptions of their expertness and trustworthiness.

Contradictory to expectations, no significant relationship was found between international supervisors' supervisor self-efficacy and their acculturation levels. This

finding failed to support parallel findings of Nilsson and Anderson (2004) for international supervisees: more acculturated (i.e., more accepting of US culture) international supervisees reported greater counseling self-efficacy. Interestingly, many participants in the present study reported middle scores for the AIRS subscales, suggesting biculturalism. Since supervisors are expected to take more initiative and active roles than supervisees, it is possible that international supervisors choose different acculturation strategies (i.e., biculturalism), compared with those of international supervisees. This may be in line with Kaiser's (1997) interview with two ethnic minority supervisors who felt more effective when they integrated their own and supervisees' cultures in cross-cultural dyads of supervision, compared with when they tried to fit into the U.S culture. It may be that international supervisors in this study were in an advanced stage of their adjustment to the U.S. culture, and so these acculturation issues were less influential on their confidence as supervisors.

In terms of the hypothesized model, supervisor self-efficacy did not serve a mediating role for the relationship between acculturation levels and perceived social influence variables among international supervisors. This was unexpected because of theoretical suggestions of the possible relationships between supervisor self-efficacy and social influence variables (Barnes, 2002; Watkins, 1990) and relationship between acculturation and attractiveness (Kaiser, 1997). The lack of support for the mediating model may be due to several reasons. First, it may be due to the insignificant correlation between acculturation and supervisor self-efficacy which did not meet the initial conditions for testing mediation. Second, it may be due to the large number of middle

scores (biculturalism) on the AIRS subscales, which meant a restricted range of scores and deviations. Third, it may be due to international supervisors' different acculturation strategies, as mentioned earlier.

Interestingly, international supervisors in the bicultural range (AIRS total scores between 102 and 128, $n = 18$) indicated different findings on the relationship between supervisor self-efficacy and social influence variables, compared with those in the full range of acculturation. Participants in the bicultural range indicated that supervisor self-efficacy was strongly related to social influence variables except attractiveness. These participants were characterized by the following demographics: approximately 13 years ($n = 18$, range: 4 - 25) for the average years of stay in the U.S., about 40 years old (range: 31 - 53) for the average of age, about 3 years (range: 0.3 - 10) for the average years of supervision provided. Only one participant in this subgroup identified as "White" while others indicated "person of color" with one unidentified participant. Six participants indicated English language as one of their official languages in their home countries. Three participants were males and 19 were female. Regarding residency plan, 1 indicated for "other" (specified as "sabbatical for one year in Canada"), 2 indicated for not identified, and 18 indicated for "plan to stay in the U.S. No one selected "plan to return to home country."

International supervisors' gender, first language preference (i.e., English vs. non-English), and perceived racial appearance ("Person of Color" vs. "White") did not significantly predict their perceived social influence variables. Although this finding was expected based on the null hypothesis, it was exploratory in nature. Although the lack of

a relationship between counselors' gender and their perceived attractiveness had been found earlier (Angle & Goodyear, 1984), it was unclear if this would be the same for international supervisors in cross-cultural dyads. There have been indications that male supervisees may overrate their effectiveness as counselors while female supervisees underestimate their clinical skills (Borders & Brown, 2005; Warburton, Newberry, & Alexander, 1989).

It has been noted that fluency in English and length of stay in the U.S. affect international students' experiences (Mittal & Wieling, 2006; Mori, Inman, & Caskie, 2009; Ng, 2006b). However, in the present study, considering the substantial time participants had spent in the U.S., their first language preference (i.e., whether English was one of their official first languages) may have been overridden by their extensive time in the U.S. to develop their English skills, regardless of their official first language. Thus, the language use acculturation variable did not explain their language challenges in supervision, or suggested they had few language challenges in supervision. It is also possible that international supervisors may struggle less with English than those who have been here for fewer years (e.g., master's level international supervisees, doctoral level international supervisors) in the U.S., no matter whether English is their first language preference or not. In the present study, international supervisors who stayed longer in the U.S. indicated higher mean scores on all social influence variables, except attractiveness, than those who had been in the U.S. for a shorter time (See Table 25).

Even though ethnic minority supervisors experience challenges of being underestimated by their supervisees (Kaiser, 1997; Priest 1994), their self-perceptions of

their expertness may be more influenced by their experiences and training than by their ethnicity. This suggestion may be line with the finding of Haley (2001) of no significant difference in supervisor self-efficacy among various ethnic/racial (including international supervisors) groups. In Haley's study, overall scores on supervisor self-efficacy (using a different measure, the Supervisor Self-Efficacy Questionnaire developed by Haley) were compared among 145 doctoral student interns at counseling centers based upon their ethnic backgrounds. About 6.2% of participants indicated "other" ethnic backgrounds, including "international."

Overall, for international supervisors in the present study, supervisor self-efficacy was significantly related to all the three social influence variables (i.e., expertness, attractiveness, trustworthiness). Only one aspect of social influence, attractiveness, was significantly related to perceived prejudice in cross-cultural dyads of clinical supervision. Interestingly, the impact of acculturation on supervisor self-efficacy did not seem to be the same as that on counselor self-efficacy reported in Nilsson's study (1999): more acculturated international supervisees indicated greater counseling self-efficacy. It may be that other supervisory variables (e.g., supervisor role expectations, supervisory working alliance) may serve as potential confounding variables which could affect international supervisors' self-efficacy. These supervisory variables were not included in the present study.

In prior studies, supervisors' social influence variables were mainly rated by their supervisees. Supervisee satisfaction with supervision was related to supervisors' perceived trustworthiness or/and expertness more than attractiveness (Culbreth &

Borders, 1999; Allen et al, 1986). These supervisees' preferred characteristics of supervisors may be influenced by supervisee development levels (Carey et al., 1988; Heppner & Roehlke, 1984). Supervisees in the earlier stage of their development may believe that trustworthy supervisors could be effective in creating a safe environment and providing support for reducing their anxiety as novice counselors. Likely supervisees, international supervisors also value trustworthiness and expertness more than attractiveness in perceiving them as efficacious supervisors. All together, for international supervisors, acculturation seems to have both direct and indirect impact on their experiences as supervisors in cross-cultural dyads of clinical supervision.

Limitations

Several limitations should be considered in interpreting results of the present study. First, since all instruments are construed based on self-perceptions and administered in a self-report format, possible social desirability might be involved in participants' responses. For example, this may cause overrated scores on the study variables reflecting inaccurate respondents' characteristics. In order to alleviate this limitation, only individual codes (i.e., any personal information was not included) provided on the survey packet was used for data collection and analyses. A safe data storing procedure was thoroughly explained on the informed consent.

Second, this study is the first to use the Supervisor Rating Form - Short to rate supervisors' self-perceptions of their social influence variables, which is different from the intention for which was constructed (i.e., supervisees' rating for their supervisors' social influence variables). Therefore, the SRF may have failed to measure some

important supervisors' characteristics which could be associated with their perceived self-efficacy and acculturation levels.

Third, only international supervisors participated in this study. No data were collected from their supervisees, who may have rated their supervisors' characteristics differently. Comparisons of perceptions of both supervisors and their supervisees could provide more reliable information in understanding factors that impact on international supervisors' perceptions.

Fourth, due to the limited target population and restriction to paper/pencil survey, participants were obtained from other counseling related programs (i.e., marriage and therapy, counseling psychology) along with counselor education programs. Nevertheless, the sample size ($n = 37$) was still fairly small. The small sample size may have affected results of statistical analyses conducted in this study. For example, a wide range of scores on the AIRS subscales was not obtained due to the small sample size, which could weaken validity of the AIRS. In addition, the small sample size yielded unbalanced subgroups, which may have caused difficulties in accurate comparisons between two subgroups. For example, of all the 36 participants, only 4 identified as "White," while the other 32 identified as "person of color." Although no significant mean differences were found between these two subgroups on the study variables, the current results may be different when comparing balanced subgroups which represent international supervisors in the U.S. as whole. The sample represented 5 continents (i.e., Asia, Africa, Europe, Latin America, and North America), with 65% ($n = 24$) of the sample from Asia. Therefore, this sample may not be representative of all international supervisors or it may

if most international supervisors actually are from Asia. Nevertheless, the results may not be as generalizable to supervisors from all countries.

Fifth, the AIRS subscales were initially designed to measure how internationals relate to American and U.S culture in general. Thus, the AIRS may not measure preferred acculturation strategies (e.g., preferred language use at work) specific to one's professional life. Different domains of life (e.g., social life, professional life) may not be influenced by host and home culture in the same degree. For example, international students may prefer to use the host language for professional networking, but may tend to choose their first language in consuming media and in religious customs.

Nevertheless, these results of this study provided the first insights into self-perceptions of international supervisors about their work as supervisors when working with U.S.-born supervisees. These results provide some meaningful directions for future research in examining the factors which impact international supervisors' perceptions in cross-cultural supervisory relationship.

Directions for Future Research

This study can be extended by increasing the sample size. The current findings contain interesting comparisons between subgroups divided by length of stay in the U.S., gender, and supervision experiences, which could contribute to explorations of potential predictors of perceived social influence variables. For example, novice international supervisors (i.e., provided less than 12 months of supervision, $n = 12$) indicated higher scores on all the study variables except expertness, supervisor self-efficacy, and language use, compared with experienced international supervisors ($n = 21$). This indicated that

these variables may be influenced by the length of months international supervisors have provided supervision to U.S. - born supervisees. However, since these two groups are obviously uneven and differences were not significant, careful consideration is needed in generalizing from this comparison. A larger sample size could be helpful in making more reliable comparisons. Since the target population is very limited in geographical locations, using an online survey could be helpful in recruiting more participants.

Results of the present study revealed that no significant relationships exist between supervisor self-efficacy and acculturation among international *supervisors*. However, the previous studies (e.g., Nilsson, 1999) reported significant relationships between counselor self-efficacy and acculturation among international *supervisees*. Thus, future research on the role of acculturation in internationals' perceptions of their professional capabilities needs to consider possible differences between international supervisees and international supervisors. Conducting this comparison in different specified supervision dyads (e.g., international supervisors and international supervisees, international supervisors and U.S-born supervisees) may provide useful information in understanding the roles of acculturation among international supervisors. Besides acculturation, exploring other potential factors (e.g., supervisory working alliance, supervision style) influencing their perceptions of professional credibility need to be studied in the future. Another comparison study between dyads of international supervisors and U.S. supervisees and U.S. supervisors and international supervisees on supervisor self-efficacy could be useful to examine the role of acculturation on supervisor perceptions. Nilsson (1999) found significant differences between international

supervisees and U.S. supervisees on counseling self-efficacy and role difficulties:

international supervisees indicated less counseling self-efficacy than U.S. supervisees.

The study failed to support the mediation between the study variables. This may be due that the mediation models were not tested with all the subscales simultaneously. In a future study, the mediation model may need to be constructed with Structural Equation Model (SEM) instead of piecemeal tests of subscales.

The study revealed that for international supervisors perceived attractiveness was related to their feelings of prejudice in working with U.S.-born supervisees. In this study, it was unclear if international supervisors felt being prejudiced by their own supervisees or by Americans in general. For example, if international supervisors were not favored by their supervisees due to supervisees' own stereotypes, it could affect feeling misunderstood by and distant from supervisees. However, international supervisors may respond from their feeling of being unwelcomed by Americans both in the past and present. Therefore, further study is needed to consider limiting supervisors' perceptions to either supervisory relationship or supervisees when measuring their perceived prejudice.

Implications for Counselor Educators and Supervisors

The present study is the first empirical study of the relationship between international supervisors' social influence variables, supervisor self-efficacy, and acculturation in cross-cultural dyads of clinical supervision.

For Counselor Educators and Clinical Supervisors

Given the relationship between international doctoral student supervisors' self-efficacy, attractiveness, and perceived prejudice, counselor educators (e.g., faculty supervisors) need to be aware of this relationship. By initiating a discussion about favorable supervisors' characteristics based on international supervisors' cultural norms and their former supervisors, faculty supervisors may help them identify their own preferred characteristics as supervisors. Supervisors are responsible for including a discussion regarding cultural issues in supervision training (Borders & Brown, 2005; Garrett et al, 2001; Hird et al. 2001; Nilsson, 2007). After that, supervisors can encourage international doctoral student supervisors to have a similar discussion with their own supervisees. Mori et al. (2009) suggested that more discussion of culture results in higher quality of supervision. The more compatibility or similarity supervisors share with their supervisees, the more likable they can be viewed in supervision (Kaiser, 1997). This discussion may help international doctoral student assess their self-perceptions on supervisor self-efficacy.

Results of the present study indicate that international supervisors feeling prejudiced is related to their perceived attractiveness. Some of these feelings may be normalized as novice supervisors through group supervision process since group supervision peers can provide focused and objective feedback on international supervisors' concerns (Borders, 2005). Thus, faculty supervisors need to create a safe and trustworthy group environment for this type of group process. Faculty supervisors may want to ask doctoral student supervisors to bring up any concerns regarding the subject of

diversity in the first group meeting, so that doctoral student supervisors know they are expected to talk about this in supervision, and think about this and observe themselves when working with their own supervisees. This will help doctoral student supervisors increase their self-awareness regarding differences and similarities in cultures between supervisors and supervisees. In addition, international doctoral student supervisors need to ask their supervisor/and group supervision peers to observe for their concerns regarding supervisees' cultural stereotypes and their own, if any.

For International Supervisors

The findings of this study indicated that many participants ($n = 21$, 57%) choose biculturalism for their acculturation preference. This supported previous findings that ethnic minority supervisors feel most effective when they choose biculturalism (Killian, 2001). Mori et al. (2009) suggested that international supervisors need to learn how their cultural factors influence supervisory work and embrace their own cultural backgrounds as well. Therefore, exploring benefits and challenges when choosing biculturalism in working with U.S.-born supervisees can help international supervisors maximize effectiveness of supervisor credibility. Professional networking could be a useful way to share and brainstorm ideas for applying biculturalism to their supervision practice.

Conclusion

This study has provided the first empirical information on international supervisors' perceptions in cross-cultural dyads of clinical supervision. Results indicated that international supervisors' supervisor self-efficacy was significantly related to their perceptions of their social influence variables in working with U.S.-born supervisees.

Their perceived attractiveness was related to their perceived prejudice (i.e., acculturation).

It is interesting that many international supervisors selected biculturalism for their acculturation preference. Further study is needed to explore the relationship between international supervisors' self-perceptions and biculturalism. In addition, this study revealed the importance of awareness of possible different roles of acculturation between international supervisors and international supervisees in perceiving their professional capability.

The role of clinical supervisors is vital due to its strong influence on the development of supervisees. Thus, it is important to understand the relationship between international supervisors' cultural factors, their beliefs, and self-perceptions of their social influence credibility in working with U.S.-born supervisees. This study contributes to better understanding of international supervisors' experiences in cross-cultural dyads of clinical supervision providing direction for future research and practical recommendations for professional development of international supervisors.

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APPENDIX A: INSTRUCTIONS AND INFORMED CONSENT

Email Invitation to Counseling Network Listservs.....	147
Email Invitation to Counseling Department Listservs	148
Email Invitation to individuals who provided personal contact information (SACES 2008, ACA 2009)	149
Email Invitation to Counseling AUCCCD	150
Email Invitation to individuals who provided contact information (ACES 2009).....	151
Cover Letter for Main Study.....	152
Pilot Study Script for Obtaining Informed Consent	153
Informed Consent for the Pilot Study.....	155
Informed Consent for the Main Study	156

Email Invitation to Counseling Network Listservs

Dear counselor colleagues,

My name is Mijin Chung and I am a doctoral candidate at the University of North Carolina at Greensboro in the Department of Counseling and Educational Development. I am conducting a research study for my dissertation on the experiences of international students and counselor educators as supervisors of practicum or internship students. To date, researchers have only studied international supervisees, so your participation will provide a new perspective on the experiences of international supervisors.

I am looking for international doctoral students or international counselor educators who would be willing to participate in a 20-25 minute survey questionnaire. Due to some constraints one of my measures, I am not able to use an online survey. If you are interested in participation, please email me your mailing addresses at mijinni2009@gmail.com. Since the number of international supervisors is small and not easily accessed, I would appreciate your sending this email to any colleagues who are international supervisors and might be interested in participating.

All participants will be eligible to enter a drawing for one of two \$100 gift cards.

Thank you for your consideration and your help.

Mijin Chung
Doctoral Candidate
Department of Counseling and Educational Development
The University of North Carolina at Greensboro

Email Invitation to Counseling Department Listservs

Dear counselor colleagues,

My name is Mijin Chung and I am a doctoral candidate at the University of North Carolina at Greensboro in the Department of Counseling and Educational Development. I am conducting a research study for my dissertation on the experiences of international students and counselor educators as supervisors of practicum or internship students. To date, researchers have only studied international supervisees, so your participation will provide a new perspective on the experiences of international supervisors.

I am looking for international doctoral students or counselor educators who would be willing to participate in a 20-25 minute survey questionnaire. I would appreciate if you forward this email to all of your international doctoral students or international counselor educators to inform them of the opportunity to participate in the research.

Due to some constraints one of my measures, I am not able to use an online survey. Therefore, all participants will be asked to email me their mailing addresses at mijinni2009@gmail.com if they are interested in participation. Since the number of international supervisors is small and not easily accessed, participants will be also asked to send this email to any colleagues who are international supervisors.

All participants will be eligible to enter a drawing for one of two \$100 gift cards.

Thank you for your consideration and your help.

Mijin Chung
Doctoral Candidate
Department of Counseling and Educational Development
The University of North Carolina at Greensboro

**Email Invitation to individuals who provided personal contact information
(SACES 2008, ACA 2009)**

Dear counselor colleagues,

My name is Mijin Chung and I am a doctoral candidate at the University of North Carolina at Greensboro in the Department of Counseling and Educational Development. You received this email because you provided your email address at my presentations at SCAES 2008 or ACA 2009 in order for me to contact you regarding my research study. I am conducting a research study for my dissertation on the experiences of international students and counselor educators as supervisors of practicum or internship students. To date, researchers have only studied international supervisees, so your participation will provide a new perspective on the experiences of international supervisors.

I am looking for international doctoral students or international counselor educators who would be willing to participate in a 20-25 minute survey questionnaire. Due to some constraints one of my measures, I am not able to use an online survey. If you are interested in participation, please email me your mailing addresses at mijinni2009@gmail.com. Since the number of international supervisors is small and not easily accessed, I would appreciate your sending this email to any colleagues who are international supervisors and might be interested in participating.

All participants will be eligible to enter a drawing for one of two \$100 gift cards.

Thank you for your consideration and your help.

Mijin Chung
Doctoral Candidate
Department of Counseling and Educational Development
The University of North Carolina at Greensboro

Email Invitation to Counseling AUCCCD

My name is Mijin Chung and I am a doctoral candidate at the University of North Carolina at Greensboro in the Department of Counseling and Educational Development. I am conducting a research study for my dissertation on the experiences of international students and counselor educators as supervisors of practicum or internship students. To date, researchers have only studied international supervisees, so your participation will provide a new perspective on the experiences of international supervisors.

I am looking for international doctoral students or counselor educators who would be willing to participate in a 20-25 minute survey questionnaire. I would appreciate if you forward this email to all of your international doctoral students or international counselor educators to inform them of the opportunity to participate in the research.

Due to some constraints one of my measures, I am not able to use an online survey. Therefore, all participants will be asked to email me their mailing (not email) addresses at mijinni2009@gmail.com if they are interested in participation. Since the number of international supervisors is small and not easily accessed, participants will be also asked to send this email to any colleagues who are international supervisors.

All participants will be eligible to enter a drawing for one of two \$100 gift cards.

Thank you for your consideration and your help.

Mijin Chung
Doctoral Candidate
Department of Counseling and Educational Development
The University of North Carolina at Greensboro

Email Invitation to individuals who provided contact information (ACES 2009)

Dear counselor colleagues,

My name is Mijin Chung and I am a doctoral candidate at the University of North Carolina at Greensboro in the Department of Counseling and Educational Development. You received this email because you provided your email address at my presentations at ACES 2009 conference in order for me to contact you regarding my research study. I am conducting a research study for my dissertation on the experiences of international students and counselor educators as supervisors of practicum or internship students. To date, researchers have only studied international supervisees, so your participation will provide a new perspective on the experiences of international supervisors.

If you are either international doctoral students or international counselor educators, you are eligible to participate in this study, which includes a 20-25 minute survey questionnaire. Due to some constraints one of my measures, I am not able to use an online survey. If you are interested in participation, please email me your preferred physical mailing addresses at mijinni2009@gmail.com. Since the number of international supervisors is small and not easily accessed, I would appreciate your sending this email to any colleagues who are international supervisors and might be interested in participating.

All participants will be eligible to enter a drawing for one of two \$100 gift cards.

Thank you for your consideration and your participation.

Mijin Chung, MED, EDS, LPC, NCC, ACS
Doctoral Student
Department of Counseling and Educational Development
The University of North Carolina at Greensboro

Cover Letter for Main Study

Dear counselor colleagues,

My name is Mijin Chung and I am a doctoral candidate at the University of North Carolina at Greensboro in the Department of Counseling and Educational Development. I am conducting a research study for my dissertation on the experiences of international students and counselor educators as supervisors of practicum or internship students. To date, researchers have only studied international supervisees, so your participation will provide a new perspective on the experiences of international supervisors.

I am looking for international doctoral students or international counselor educators who would be willing to participate in a 20-25 minute survey questionnaire. Due to some constraints one of my measures, I am not able to use an online survey. If you are interested in participation, please email me your mailing addresses at mijinni2009@gmail.com. Since the number of international supervisors is small and not easily accessed, I would appreciate your sending this email to any colleagues who are international supervisors and might be interested in participating.

All participants will be eligible to enter a drawing for one of two \$100 gift cards.

Thank you for your consideration and your help.

Mijin Chung
Doctoral Candidate
Department of Counseling and Educational Development
The University of North Carolina at Greensboro

Pilot Study Script for Obtaining Informed Consent

Read by Mijin Chung on _____

Thank you for your consideration regarding participation in the study I am conducting. The overall purpose of the main study is to understand experiences of international supervisors in U.S. counseling programs. I hope to enhance understanding of international supervisors so that counselor educators and other related professionals can assist international supervisors improve their professional development. This pilot study is for making sure that all instruments are appropriate (i.e., the wording is clear and understandable) for international supervisors to respond.

You are invited to participate in this study because you are either international doctoral students or counselor educators who have multicultural backgrounds and you understand what helps international supervisors share their experiences effectively. You will be asked to take all instruments (three standardized instruments and one demographic form) as well as to provide verbal feedback based on your experiences and multicultural perspectives after you completed each instrument.

You will not receive any direct benefit from participating in this study, but you may be enhancing counseling professionals' understanding about international supervisors in U.S. counseling programs. You may also be helping counselor educators assist international doctoral students' professional development.

You will be audio/video recorded throughout the course of this study so that I can remember what you said. I will listen to the recording if I need to check my notes about any of your suggestions. You do not have to say your name on the recording, and you will not put your names or any identifying information on your written feedback. I will lock the recording and the transcription of what you said in a cabinet at my house different from the locked cabinet where I will keep the informed consents. I will keep the recording and papers for three years after I finish the study. Then, I will destroy both of them. All information obtained in this study is strictly confidential unless disclosure is required by law.

This study involves minimal risk because it could be potentially embarrassing or cause difficulty if participants' identities were accidentally disclosed and they had discussed any negative impressions of Americans. The likelihood of this happening, however, is very small.

Participation in this study is entirely voluntary. You can stop at any time even after you agree to participate in this study. You are free to leave the study whenever you like without any penalty or unfair treatment. Do you have any questions?

If you think of a question later, you may call me, Mijin Chung (e-mail: m_chung2@uncg.edu, phone: 336-324-5118) or my dissertation chair, DiAnne Borders (e-mail: borders@uncg.edu, phone: 336-334-3425). If you decide you want to be a part of this study, I will ask you to sign the informed consent. If you sign it, I will give you a copy of it for your records.

This study and related papers here today were approved by the University of North Carolina at Greensboro. They make certain I follow all the rules and laws in doing this study. If you want to know more about your rights in this study you may call Eric Allen, Research Compliance Officer, at UNCG at 336-256-1482.

Informed Consent for the Pilot Study

THE UNIVERSITY OF NORTH CAROLINA AT GREENSBORO

CONSENT TO ACT AS A HUMAN PARTICIPANT: SHORT FORM ORAL PRESENTATION

Project Title: Pilot Study: Examining the relationships between international supervisors' acculturation, self-efficacy, and social influence in cross-cultural dyads of clinical supervision

Project Director: L. DiAnne Borders, PhD., & Mijin Chung, MED, EDS

Participant's Name: _____

Mijin Chung has explained in the earlier verbal presentation the procedures involved in this research study. These include the purpose and what will be required of you. Any benefits and possible risks were also described. Mijin Chung has answered all of your current questions about your participation in this study. You are free to refuse to participate or to withdraw your consent to be in this study at any time without penalty or unfair treatment if you choose not to be in the study. Being in this study is entirely voluntary. Your privacy will be protected because you will not be identified by name or other identifiable information as being part of this project.

The University of North Carolina at Greensboro Institutional Review Board, which ensures that studies involving people follows federal rules, has approved this study, its consent form, and the earlier verbal presentation. Any questions about this study itself will be answered by calling DiAnne Borders at 336-334-3425 or by calling Mijin Chung at 336-324-5118. Questions about your rights as a participant in this study can be answered by calling Mr. Eric Allen at (336) 256-1482. Any new information that comes up during the study will be provided to you if the information might affect your willingness to continue participation in the project.

By signing this form, you are agreeing that you are 18 years of age or older. You also agree to participate in the study described to you by Mijin Chung.

—

Participant's Signature

Date

Witness* to Oral Presentation
and Participant's Signature

*Investigators and data collectors may not serve as witnesses. Participants, family members, and persons unaffiliated with the study may serve as witnesses.

Informed Consent for the Main Study

UNIVERSITY OF NORTH CAROLINA AT GREENSBORO *CONSENT TO ACT AS A HUMAN PARTICIPANT: LONG FORM*

Project Title: International supervisors' social influence, self-efficacy, and acculturation in cross-cultural dyads of clinical supervision

Project Director: L. DiAnne Borders, PhD., & Mijin Chung, MED, EDS

Participant's Name: _____

The purpose of this study is to explore the relationship among international supervisors' social influence, self-efficacy, and acculturation in cross-cultural dyads of clinical supervision. You are selected for this study because you are either international doctoral students or international counselor educators who have experiences as clinical supervisors. As a participant in the current study you will be asked to complete a survey packet including three separate instruments: the Supervisor Rating Form –Short, the Counselor Supervisor Self-Efficacy Scale, and the American - International Relations Scale and the demographic form and the demographic information form. The questionnaire will take approximately 20-25 minutes of your time.

Participation in this study is entirely voluntary. You can stop at any time even after you agree to participate in this study. You are free to leave the study whenever you like without any penalty or unfair treatment.

In order to protect the confidentiality of participants, no identifying information except individual code will be appeared on the instruments. All data will be saved on researcher's computer and external hard drive with a securing password. Electronic files will be saved for three years until after the end of the project. After three years, all electronic files will be erased. All information obtained in this study is strictly confidential unless disclosure is required by law.

This study might involve minimal risk because it could be potentially embarrassing or cause difficulty if participants' identities were accidentally disclosed and they had discussed any negative impressions of Americans. The likelihood of this happening, however, is very small.

Although you will not receive any direct benefit from participating in this study, you may be enhancing counseling professionals' understanding about international supervisors in U.S counseling programs. You may also be helping counselor educators assist international doctoral students' professional development.

By indicating your agreement with this consent form, you agree that you understand the procedures and any risks and benefits involved in this research. You are free to refuse to participate or to withdraw your consent to participate in this research at any time without

penalty or prejudice; your participation is entirely voluntary. Your privacy will be protected because you will not be identified by name as a participant in this project.

If you think of a question, you may call me, Mijin Chung (e-mail: m_chung2@uncg.edu, phone: 336-324-5118) or my dissertation chair, L. DiAnne Borders (e-mail: borders@uncg.edu, phone: 336-334-3425). This study and related papers here today were approved by the University of North Carolina at Greensboro. They make certain I follow all the rules and laws in doing this study. If you want to know more about your rights in this study you may call Eric Allen, Research Compliance Officer, at UNCG at 336-256-1482.

Participant's Signature

Date

APPENDIX B: INSTRUMENTATION

Supervisor Rating Form – Short (SRF-S).....	159
Counselor Supervisor Self-Efficacy Scale (CSSES)	160
Demographic Information Form	162
Permission to use the SRF-S.....	164
Permission to use the CSSES.....	165

Supervisor Rating Form – Short (SRF-S)

The following 12 characteristics are followed by a seven-point scale that ranges from “not very” to “very”. Please circle the number that best represents how you perceive **yourself as a supervisor**. Though all of the following characteristics are desirable, supervisors may differ in their strengths. We are interested in knowing how you perceive **yourself on these characteristics**.

		<u>Not</u>						<u>Very</u>	
1	Friendly	1	2	3	4	5	6	7	
2	Likable		1	2	3	4	5	6	7
3	Sociable	1	2	3	4	5	6	7	
4	Warm	1	2	3	4	5	6	7	
5	Experienced	1	2	3	4	5	6	7	
6	Expert	1	2	3	4	5	6	7	
7	Prepared	1	2	3	4	5	6	7	
8	Skillful	1	2	3	4	5	6	7	
9	Honest	1	2	3	4	5	6	7	
10	Reliable	1	2	3	4	5	6	7	
11	Sincere	1	2	3	4	5	6	7	
12	Trustworthy	1	2	3	4	5	6	7	

It was modified from Young (1996).

Counselor Supervisor Self-Efficacy Scale (CSSES)

Directions: Each of the items listed below is related to a task performed in counselor supervision. Please rate your level of confidence for completing each task *right now*. Circle the number that reflects your confidence level as a supervisor. Please answer every question, regardless of whether you have actually performed the corresponding activity.

	0	1	2	3	4	5	6	7	8	9
	Not confident at all			Somewhat confident			Completely confident			
1. Select supervision interventions congruent with the model/theory being used	0	1	2	3	4	5	6	7	8	9
2. Articulate to a supervisee the ethical standards regarding client welfare	0	1	2	3	4	5	6	7	8	9
3. Present procedures for assessing and reporting an occurrence of child abuse	0	1	2	3	4	5	6	7	8	9
4. Describe the strengths and limitations of the various supervision modalities (e.g., self-report, live observation, audiotape review)	0	1	2	3	4	5	6	7	8	9
5. Assist a supervisee to deal with termination issues	0	1	2	3	4	5	6	7	8	9
6. Assist a supervisee to include relevant cultural variables in case conceptualization	0	1	2	3	4	5	6	7	8	9
7. Model effective decision-making when faced with ethical and legal dilemmas	0	1	2	3	4	5	6	7	8	9
8. Demonstrate knowledge of various counseling theories, systems, and their related methods	0	1	2	3	4	5	6	7	8	9
9. Structure supervision around a supervisee's learning goals	0	1	2	3	4	5	6	7	8	9
10. Assist a supervisee to develop working hypotheses about her/his clients	0	1	2	3	4	5	6	7	8	9
11. Solicit critical feedback on my work as a supervisor from either my peers or an evaluator	0	1	2	3	4	5	6	7	8	9
12. Understand key research on counselor development and developmental models as they pertain to supervision	0	1	2	3	4	5	6	7	8	9
13. Assist a supervisee to develop a strategy to address client resistance	0	1	2	3	4	5	6	7	8	9
14. Encourage a supervisee to share his/her negative feelings about supervision without becoming defensive	0	1	2	3	4	5	6	7	8	9
15. Listen carefully to concerns presented by a supervisee	0	1	2	3	4	5	6	7	8	9
16. Identify key ethical and legal issues surrounding client confidentiality	0	1	2	3	4	5	6	7	8	9
17. Address a supervisee's race or ethnic identity as a counseling process variable	0	1	2	3	4	5	6	7	8	9
18. Understand appropriate supervisor functions of teacher, counselor, and consultant	0	1	2	3	4	5	6	7	8	9
19. Employ interventions appropriate to a supervisee's learning needs	0	1	2	3	4	5	6	7	8	9

	0	1	2	3	4	5	6	7	8	9
	Not confident at all			Somewhat confident			Completely confident			
20. Describe the legal liabilities involved in counseling minors	0	1	2	3	4	5	6	7	8	9
21. Establish a plan to safeguard a supervisee's due process within supervision	0	1	2	3	4	5	6	7	8	9
22. Help a supervisee assess the compatibility between his/her in-session behaviors and espoused theoretical orientation	0	1	2	3	4	5	6	7	8	9
23. Model strategies that may enhance a supervisee's case conceptualization skills	0	1	2	3	4	5	6	7	8	9
24. Conduct supervision in strict accordance to the ethical standards governing my profession	0	1	2	3	4	5	6	7	8	9
25. Facilitate a supervisee's cultural awareness	0	1	2	3	4	5	6	7	8	9
26. Appear competent in interactions with a supervisee	0	1	2	3	4	5	6	7	8	9
27. Receive critical feedback from a supervisee on my performance as a supervisor without becoming defensive or angry	0	1	2	3	4	5	6	7	8	9
28. State a rationale for choosing a supervision intervention based on theory, client/counselor dynamics, and/or setting	0	1	2	3	4	5	6	7	8	9
29. Recognize possible dual relationship issues that may arise within supervision	0	1	2	3	4	5	6	7	8	9
30. Demonstrate respect for a supervisee who has a different worldview from myself	0	1	2	3	4	5	6	7	8	9
31. Assess a supervisee's multicultural competencies	0	1	2	3	4	5	6	7	8	9
32. Address parallel processes as they arise within the supervisory relationship	0	1	2	3	4	5	6	7	8	9
33. Communicate due process procedures to a supervisee if he/she is unhappy with the supervision I have provided	0	1	2	3	4	5	6	7	8	9
34. Demonstrate respect for various learning styles and personal characteristics within supervision	0	1	2	3	4	5	6	7	8	9
35. Facilitate case discussion during group supervision	0	1	2	3	4	5	6	7	8	9
36. Balance the needs of the group with the individual needs of each supervisee during group supervision	0	1	2	3	4	5	6	7	8	9
37. Model appropriate responses to affect presented in group supervision	0	1	2	3	4	5	6	7	8	9
38. Offer adequate support to all members of a group during group supervision	0	1	2	3	4	5	6	7	8	9
39. Integrate an understanding of supervisees' learning styles into the group supervision process	0	1	2	3	4	5	6	7	8	9

Demographic Information Form

Please answer (fill in or circle) the following questions about yourself as a supervisor

1. Home country: _____
2. First language: _____
3. Age : _____
4. Gender : a) Female b) Male
5. How long have you lived in the U.S.? _____ year(s) _____ month(s)
6. What is your current position?
 - a) Doctoral student b) Counselor educator c) Other (please specify)
7. Is English one of the official languages of your home country? a) Yes b) No
8. What is the highest degree you earned **outside of the U.S.**? (please circle one)
 - a) Bachelor's b) Master's c) Specialist d) Doctoral e) Other (please specify) _____

Country earned this degree: _____
9. What is the highest degree you have earned in **the U.S. at this time?** (please circle one)
 - a) Master b) Special c) Doctoral d) Other (please specify) _____
10. Number of months you have provided clinical supervision to practicum or internship students in U.S. : _____
11. Types of clinical supervision you have provided (please circle all that apply to you)
 - a) Individual b) Triadic c) Group supervision d) Other (please specify) _____
12. Who did you supervise? (please circle all that apply to you)
 - a) Master's practicum students b) Master's internship students c) Other (please specify) _____
13. Have you received any formal supervision training? a) Yes b) No

If *Yes*, please explain briefly:

- 1) Type of supervision training (e.g., academic course, workshop, seminar, etc.)

- 2) Total weeks of supervision training you have received

14. What is your residency plan for the next three years? (**for counselor educators only**, please circle one)

a) I plan to stay in the U.S. and gain work experience here after graduation

b) I plan to return to my home country

c) Other (please specify) _____

15. I plan to return to my home country after graduation? (**for doctoral students only**, please circle one)

a) I plan to stay in the U.S. and gain work experience here after graduation

b) I plan to return to my home country

c) Other (please specify) _____

16. How do you think others perceive your racial appearance? (please circle one)

a) "Person of color" b) "White"

Thank you for your participation in this study. I truly appreciate it.

Permission to use the SRF-S

From John Young JSYOUNG3 <JSYOUNG3@uncg.edu>
To Mijin Chung <m_chung2@uncg.edu>

Date Wed, Oct 29, 2008 at 3:14 PM
Subject Re: question about your dissertation

Mijin,
You have my permission.

J. Scott Young, PhD, Professor & Chair

Department of Counseling & Educational Development

The University of North Carolina at Greensboro

228 Curry Building
PO Box 26170
Greensboro, NC 27402
336-334-3464
jsyoung3@uncg.edu

"Mijin Chung" <m_chung2@uncg.edu>
10/29/2008 11:31 AM To "John Young JSYOUNG3" <jsyoung3@email.uncg.edu>
Cc Subject Re: question about your dissertation

Hi, Dr. Young

I am hoping to conduct my pilot study with five participants (three international students and two counselor educators) from our department in November. I want to ask your permission to use SRF-S form, which is appended to your dissertation, for my pilot study. If it appears that this scale will be appropriate for my main study, I also would appreciate your permission to reprint it from your dissertation (I might end up revise wording for instruction on this scale after my pilot study). Thanks for your consideration and response.

Mijin

--

Mijin Chung, MED, EDS, NCC
Doctoral Student
Department of Counseling and Educational Development
University of North Carolina at Greensboro
Office: 223 Ferguson Phone: 336-334-5112

Permission to use the CSSES

From Barnes, Kristin L <klbarnes@sjfc.edu>
To Mijin Chung <m_chung2@spartan.uncg.edu>

Date Tue, Jul 1, 2008 at 7:13 AM
Subject RE: counselor supervisor self-efficacy

Hi Mijin,

I will send you a copy of the manuscript as well as an electronic version of the CSSES when I return home later this week. Best wishes on your dissertation,

Kristin
Kristin L. Barnes, Ph.D., LMHC
Assistant Professor of Mental Health Counseling
St. John Fisher College
School of Nursing, room 325
Rochester, NY 14618
phone: (585) 385-7318
fax: (585) 385-7276

From: Mijin Chung [mailto:m_chung2@spartan.uncg.edu]
Sent: Tue 6/24/2008 5:29 PM
To: Barnes, Kristin L
Subject: counselor supervisor self-efficacy

Hi, Dr. Barnes

If it appears that this scale will be appropriate for my study, I also would appreciate your permission to reprint it from the Bernard and Goodyear book. Thanks for your consideration and response.

Sincerely,

Mijin Chung

--

Mijin Chung, MED, EDS, NCC
Doctoral Student
Department of Counseling and Educational Development
University of North Carolina at Greensboro
Office: 223 Ferguson, Phone: 336-334-5112